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UNITED STATES BANKRUPTCY COURT
CENTRAL DISTRICT OF CALIFORNIA
LOS ANGELES DIVISION

In re:	)	Case No.: 2:24-bk-13211-DS
)	
	)	Chapter 7
GLADYS GRACE LIAD VILLACORTA,)	
	)	UNITED STATES TRUSTEE'S
Debtor.	)	NOTICE OF MOTION AND MOTION
	)	TO DISMISS CHAPTER 7 CASE
	)	PURSUANT TO 11 U.S.C. § 707(b)(1),
	)	(b)(2) AND (3)(B) AND CONTINGENT
	)	MOTION TO EXTEND BAR DATE FOR
	)	FILING COMPLAINT UNDER 11 U.S.C. §
	)	727 OBJECTING TO DEBTOR'S
	)	DISCHARGE; MEMORANDUM OF
	)	POINTS AND AUTHORITIES AND
	)	DECLARATION OF MARLENE
	)	FOUCHE IN SUPPORT THEREOF
)	
	)	DATE: July 25, 2024
	)	TIME: 11:30 a.m.
	)	CTRM: 1639
	)	255 E. Temple Street
	)	Los Angeles, CA 90012
)	
)	

TO THE HONORABLE DEBORAH J. SALTZMAN, UNITED STATES BANKRUPTCY
JUDGE FOR THE CENTRAL DISTRICT OF CALIFORNIA, DEBTOR and DEBTOR'S
COUNSEL OF RECORD, CREDITORS AND ALL PARTIES IN INTEREST:

1 PLEASE TAKE NOTICE THAT, on July 25, 2024, at 11:30 a.m., or as soon thereafter as
2 the matter may be heard, Peter C. Anderson, United States Trustee for the Central District of
3 California (hereafter "U.S. Trustee"), through the undersigned attorney, will and hereby does move
4 this Court to enter an Order dismissing this case under 11 U.S.C. § 707(b)(1) and (b)(2) and/or
5 (3)(B). In the alternative, in the event that the requested case dismissal is not granted, the U.S.
6 Trustee also moves the Court for an order extending the filing deadline for the U.S. Trustee only for
7 commencing an adversary action under § 727 seeking denial of the Debtor's discharge.

8 If you wish to oppose or respond to this motion, you must file a written response with the
9 Clerk of the United States Bankruptcy Court at Edward R. Roybal Building and Courthouse, 255 E.
10 Temple Street, Room 940, Los Angeles, California 90012, serve a copy of it on the United States
11 Trustee at the address set forth above and upon the Chapter 7 Trustee (see attached service list) no
12 less than 14 days prior to the above hearing date. If you fail to file a response to this motion within
13 such time period, the Court may treat such failure as a waiver of your right to oppose the motion
14 and may grant the requested relief.

15 This Motion is based upon this Notice of Motion and Motion, the Memorandum of Points
16 and Authorities attached hereto, the Declaration of Marlene Fouche, the Request for Judicial
17 Notice, and all other papers and pleadings on file with this Court.

18 DATED: July 2, 2024

19 Respectfully submitted,
20 PETER C. ANDERSON
UNITED STATES TRUSTEE

21
22 /s/ Noreen A. Madoyan
23 By: Noreen A. Madoyan
24 Attorney for the United States Trustee
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1 **MEMORANDUM OF POINTS AND AUTHORITIES**

2 **I. INTRODUCTION**

3 The instant Chapter 7 case filed by Debtor, Gladys Grace Liad Villacorta (“Debtor”),
4 demonstrates the type of abuse § 707(b) was intended to prevent. The U.S. Trustee’s investigation
5 reveals that the Debtor has overstated her allowed expense deductions in the Means Test. Not only
6 does the Debtor’s case represent presumed abuse under 11 U.S.C. § 707(b)(2), in that the **Debtor**
7 **has \$3,754.75 in monthly disposable income after allowed deductions (equaling \$225,285 over**
8 **a five year period)**, the totality of the circumstances of the Debtor’s financial situation
9 demonstrates abuse under 11 U.S.C. § 707(b)(3)(B) because the Debtor clearly has the ability to
10 repay a sufficient amount of the scheduled unsecured debt.

11 Accordingly, whether based on the presumption of abuse, or the actual abuse demonstrated
12 by the totality of the circumstances, this court should dismiss Debtor’s case.

13 **II. JURISDICTION AND STANDING**

14 This Court has jurisdiction of this matter under 28 U.S.C. § 1334(a) and (b), 28 U.S.C. §
15 157(a) and (b)(1) and 28 U.S.C. § 151. This is a core proceeding under 28 U.S.C. § 157 (b)(2)(A)
16 and (B). This motion is filed pursuant to 11 U.S.C. § 707(b)(1), (b)(2) and (b)(3).¹

17 Section § 707(b)(1) provides that upon motion of the United States Trustee, a court may
18 dismiss a Chapter 7 case filed by an individual debtor who owes primarily consumer debts if it
19 finds that the granting of relief would be an abuse of the provisions of Chapter 7 of the Bankruptcy
20 Code.² Further, § 704(b)(1)(A), provides that the U.S. Trustee must review the materials filed by
21 the Debtor and file a Statement of Presumed Abuse within 10 days of the conclusion of the § 341(a)
22 meeting. Based on that requirement, on June 6, 2024, the U.S. Trustee filed a Statement of
23 Presumed Abuse (“10 Day Statement”). Section 704(b)(2) and Federal Rules of Bankruptcy
24 Procedure 9006(a) provide that the U.S. Trustee must file any motion to dismiss or convert within
25 30 days of the filing of the 10 Day Statement. Pursuant to that requirement, the U.S. Trustee has
26

27 ¹ All further references to statutes will be to Title 11 of the United States Code, also known as the
Bankruptcy Code.

28 ² See 11 U.S.C. § 707(b)(1).

1 filed this Motion within thirty (30) days of the 10 Day Statement, pursuant to Federal Rule of
2 Bankruptcy Procedure 9006(a). The U.S. Trustee's motion pursuant to § 707(b)(2) is therefore
3 timely and procedurally proper.

4 Under the Federal Rules of Bankruptcy Procedure 1017(e)(1), motions to dismiss a Chapter
5 7 case pursuant to § 707(b) that are not based on the presumption of abuse contained in § 707(b)(2)
6 must be filed within 60 days after the first date set for the meeting of creditors under § 341(a),
7 unless the deadline is extended by the court. The deadline to file a motion pursuant to § 707(b)(3)
8 is July 22, 2024.³ Thus, the motion to dismiss pursuant to § 707(b)(3) is timely and procedurally
9 proper.

10 **III. FACTUAL BACKGROUND**

11 1. The Debtor filed a voluntary Chapter 7 petition in the United States Bankruptcy
12 Court for the Central District of California, Los Angeles Division on April 25, 2024.⁴

13 2. The Debtor's debts are primarily consumer in nature. The Debtor checked the box
14 on the Voluntary Petition indicating that his debts are primarily "Consumer/Non-Business." The
15 Debtor's nonpriority unsecured debt totals \$43,168.⁵

16 3. The § 341(a) Meeting of Creditors, initially set for May 21, 2024 was held, and
17 continued to May 30, 2024 and concluded on the same day.⁶

18 4. In the Debtor's Chapter 7 Statement of Current Monthly Income also known as
19 Official Form 122A-1 ("Form 122A-1"), the Debtor states that the annualized Current Monthly
20 Income⁷ is \$111,047.40.⁸ The applicable state median family income for the Debtor's family of
21

22 ³ See Case Docket for *In re: Gladys Grace Liad Villacorta*, Case No. 2:24-bk-13211-DS ("Case
23 Docket"), attached for the Court's convenience to the U.S. Trustee's Request for Judicial Notice.
24 The U.S. Trustee respectfully requests that the Court take judicial notice of Debtor's Petition,
25 Schedules, Statement of Financial Affairs and other documents filed therewith and any amendments
26 thereto which are in the Court's file, pursuant to Fed. R. Evid. 201, as made applicable to
27 bankruptcy proceedings by Fed. R. Bankr. P. 9017. The information contained in these documents,
28 signed under penalty of perjury by Debtor, are admissible admissions of Debtor pursuant to Fed. R.
Evid. 801(d). See also Declaration of Marlene Fouche ("Fouche Dec."), attached hereto.

⁴ See Case Docket attached to the Fouche Dec. as Exhibit 1.

⁵ See Petition and Schedules attached to the Fouche Dec. as Exhibit 2.

⁶ See Case Docket attached to the Fouche Dec. as Exhibit 1.

⁷ As defined by §§ 101(10A) and 707(b)(2) of the Bankruptcy Code.

three is \$109,458.00. Accordingly, the CMI exceeds the applicable state median family income amount.

5. On March 23, 2023, the U.S. Trustee filed a timely Statement of Presumed Abuse with the U.S. Bankruptcy Court.

6. On June 20, 2024, Counsel filed the Debtor's rebuttal of presumption of abuse as well as an Amended Schedule I, an Amended Schedule J, Summary of Assets and Liabilities (Official Form 106Sum or 206Sum), Declaration About an Individual Debtor's Schedules (Official Form 106Dec), Chapter 7 Statement of Your Current Monthly Income (Official form 122A-1), and the Chapter 7 Means Test Calculation (Official form 122A-2) (the "Amended Means Test").⁹

7. Pursuant to the Debtor's Amended Means Test, the Debtor's annualized CMI is \$145,689.96 (hereinafter "CMI"). The Debtor included a previously undisclosed monthly amount of \$2,454.18 for the Debtor's non-filing spouse as Net income from operating a business, profession, or a farm on Line 5.

IV. DEBTOR'S CASE SHOULD BE DISMISSED AS AN ABUSE OF CHAPTER 7

A. Dismissal Under § 707(b) Generally

Section 707(b)(1) provides that the court may dismiss a case filed by an individual whose debts are "primarily consumer debts" if it finds that granting discharge relief would be an "abuse" of the provisions of chapter 7.¹⁰ Courts may determine that either (1) a presumption of abuse arises pursuant to § 707(b)(2), or (2) if the presumption does not arise or is rebutted, the debtor's bad faith or the totality of the circumstances of the debtor's financial situation point to abuse.¹¹

In this case, the debt is "primarily consumer debt." The term "consumer debt" is defined as a "debt incurred by an individual primarily for a personal, family, or household purpose."¹² The Ninth Circuit interprets "primarily" to mean that the overall ratio of consumer to non-consumer

⁸ See Fouche Dec. as Exhibit 2.

⁹ See Case Docket.

¹⁰ 11 U.S.C. § 707(b)(1).

¹¹ 11 U.S.C. § 707(b)(2), (3).

¹² 11 U.S.C. § 101(8).

1 debt is greater than 50%.¹³ The Debtor indicated in his petition that the nature of the debt is
2 “consumer/non-business.”

3 **B. Debtor’s Case Is Presumptively Abusive Pursuant to 11 U.S.C. § 707(b)(2)**

4 Section 707(b)(2)(A)(I) provides, in pertinent part:
5 . . . the court shall presume abuse exists if the debtor’s currently monthly
6 income reduced by [certain deductions] and multiplied by 60 is not less
7 than the lesser of –

8 (I) 25 percent of the debtor’s nonpriority unsecured claims in the case or
9 \$7,700, whichever is greater; or
10 (II) \$13,650.¹⁴

11 The purpose of the means test is to “help the courts determine who can and who cannot
12 repay their debts and, perhaps most importantly, how much they can afford to pay.”¹⁵ In other
13 words, it is “intended to ensure that debtors repay creditors the maximum they can afford.”¹⁶ Under
14 this provision, the Debtor’s case is presumptively abusive because a correctly filled-out Form
15 122A-1 would show that the Debtor has \$3,754.75 in monthly disposable income after allowed
16 deductions, which projects to more than \$184,485.00 over 60 months. Rather than reflecting this
17 amount, however, the Debtor’s Form 122A-1 contains erroneous information which results in a
18 significant understatement of the Debtor’s monthly disposable income. In particular, the Debtor
19 has overstated allowed expense deductions on Form 122A-1.

20 **1. Debtor’s Actual Income**

21 ¹³ See *In re Kelly*, 841 F.2d 908, 913 (9th Cir. 1988). The most common consumer debts are home
22 mortgages, credit card debts and personal loans. *Id.*

23 ¹⁴ Pursuant to 11 U.S.C. § 104(b), the Judicial Conference of the United States published in the
24 Federal Register (at 72 B.R. 7082) its Revision of Certain Dollar Amounts in the Bankruptcy Code
25 Prescribed under Section 104(b) of the Code, effective for bankruptcy cases filed after April 1,
26 2019. As applicable to the instant case, under the Means Test, the presumption of abuse arises
27 under § 707(b)(2)(A)(I) when the Debtor’s net disposable income over a 60-month period is greater
28 than \$13,650.00. Therefore, the primary abuse presumption threshold increases from \$214.17 to
\$227.50 per month. Secondly, the presumption of abuse arises when the Debtor’s net disposable
income over a 60-month period is between \$8,175.00 and \$13,650.00 and repays 25 % of the
debtor’s nonpriority unsecured claims in the case.

¹⁵ See *Blausey v. U.S. Trustee*, 552 F.3d 1124, 1133-34 (9th Cir. 2009).

¹⁶ *Id.*

1 The Debtor's original Form 122A-1 filed with the petition showed a monthly income of
2 \$9,253.95.¹⁷ Schedule I disclosed Debtor has been employed by Bay Design Group, LLC for 4
3 months. The Debtor submitted copies of pay advices from his respective employer for the pay dates
4 covering the pay period ending December 3, 2023 through April 12, 2024. According to the pay
5 advices, the Debtor's average gross monthly salary income for the six-month "look-back" period
6 prior to the bankruptcy filing was \$4,230.78. The Debtor also disclosed additional income of
7 \$5,455.87 per month in income from her non-filing spouse, who is a Graphic Designer. To properly
8 calculate Debtor's actual gross monthly earnings, the U.S. Trustee prepared a spreadsheet to
9 calculate Debtor's estimated gross monthly income, payroll deductions and monthly expenses for
10 the six-month "look-back" period prior to the bankruptcy filing. According to the pay advices the
11 Debtor and her non-filing spouse's combined gross monthly salary income is \$10,142.41, reflecting
12 an annualized salary income of \$121,709.04.

13 However, after the U.S. Trustee filed its Notice of Presumed Abuse, the Debtor filed an
14 amended means test, which revealed an even higher CMI. Pursuant to the Debtor's Amended
15 Means Test, which includes a previously undisclosed monthly amount of \$2,454.18 for the
16 Debtor's non-filing spouse as net income from operating a business. Thus, adding the additional
17 net income to the Debtor's accurate annualized salary, these corrections result in the increased gross
18 monthly income of \$12,596.60 inclusive of the non-filing spouse's income and as reflected by the
19 U.S. Trustee Means Test, Debtor's estimated annualized income of \$151,159.20 should be on Form
20 122A-1, Line 12b.¹⁸

21 **2. Debtor has Overstated Allowed Expense Deductions**

22 The Debtor has claimed a total of all deductions allowed under § 707(b)(2) in the amount of
23 \$9,816.¹⁹ The resulting monthly disposable income under § 707(b)(2) calculated by the Debtor is
24 \$2,324.83.²⁰

25
26 ¹⁷ See Fouche Decl. at Exhibit 2.

27 ¹⁸ See Fouche Dec. at ¶16.

28 ¹⁹ See Fouche Dec. at Exhibit 2.

²⁰ *Id.*

a. The Debtor Overstated his Monthly Payroll Tax Deduction at Line 16.

At Line 16 of Debtor's Means Test Form 122A-2, Debtor claimed an average monthly payroll tax deduction of \$1,8757.57. Based on the salary advices provided by the Debtor, the average monthly payroll tax deduction is \$1,865.60. However, the Debtor's tax returns (Debtor and Debtor's non-filing spouse are filing separately as Married filing Separately) for 2023 shows that the Debtor received a refund for 2023. Therefore, as reflected in the U.S. Trustee Means Test, Debtor's average monthly payroll deduction should be increased to \$1,865.60.²¹

b. The Debtor Overstated his Monthly Life Insurance Deductions at Line 18.

At Line 18 of Debtor's Means Test Form 122A-2, Debtor claimed average monthly life insurance deductions of \$33.17. Based on the salary advices produced by the Debtor, the average monthly involuntary deduction is \$28.22. Therefore, as reflected in the U.S. Trustee Means Test, Line 21, Debtor's average monthly involuntary deductions should be decreased from \$33.170 to \$28.22²²

c. The Debtor Overstated the Amount of his Childcare Deduction at Line 21.

At Line 21 of Debtor's Means Test Form 122A-2, Debtor claimed an amount of 450.00 for childcare. The U.S. Trustee requested proof of such expense, however none was provided. As such, based on the lack of any documentation, as reflected in the U.S. Trustee Means Test, Debtor's average monthly deduction for childcare should be decreased to \$0.²³

d. The Debtor Overstated the Amount of his Additional Health Care Expense at Line 22.

At Line 22 of Debtor's Means Test Form 122A-2, Debtor claimed an amount of \$400.00 for additional health care. The U.S. Trustee requested proof of such expense, however only one dental

²¹ *Id.*

²² *Id.*

²³ *Id.*

1 bill in the sum of \$1,650 was provided for the period covering September 1, 2023, to April 30,
2 2024, that's an average expense of \$206.25 per month for the requested eight (8) months. However,
3 the Debtor provided evidence that he receives an out-of-pocket allowance of \$237/month. Given
4 this allowance is greater than \$206.25, as reflected in the U.S. Trustee Means Test, Debtor's
5 average monthly deduction for additional health care should be decreased to \$0.²⁴

6 **e. The Debtor Overstated the Amount of his Optional Telephone**
7 **Expense at Line 23.**

8 At Line 22 of Debtor's Means Test Form 122A-2, Debtor claimed an amount of \$22.00 for
9 optional telephone expense. The U.S. Trustee requested proof of such expense, however the Debtor
10 only provided phone bills covering the period September 1, 2023, to April 30, 2024 – which
11 averages \$218.07 per month for the requested eight (8) months. The Means test, line 8, allows
12 Debtors an IRS allowance of housing and utilities, including phone costs, of \$799/month. Debtor
13 has failed to provide justification for any further expense beyond the IRS allowance. As such, the
14 Debtor's average monthly deduction for optional telephone expense should be decreased to \$0.²⁵

15 **f. The Debtor Overstated the Amount of his Health Insurance at**
16 **Line 25.**

17 At Line 22 of Debtor's Means Test Form 122A-2, Debtor claimed an amount of \$321.38 for
18 health insurance, \$95.10 for disability insurance, and \$80.78 for a health savings account. The U.S.
19 Trustee reviewed the pay advices, and noted that the average payroll deductions was \$334.96 for
20 Health Insurance, \$7.68 for Disability insurance, and \$87.19 for Health Savings account. As such,
21 the Debtor's average monthly deduction for such expenses should be reduced accordingly.

22 **g. The Debtor Overstated the Amount of his Contribution to Family**
23 **at Line 26.**

24 At Line 22 of Debtor's Means Test Form 122A-2, Debtor claimed an amount of \$100.00 for
25 family contributions. The U.S. Trustee requested proof of such expense, however none was
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27 ²⁴ *Id.*

28 ²⁵ *Id.*

1 provided. As such, based on the lack of any documentation, as reflected in the U.S. Trustee Means
2 Test, Debtor's average monthly deduction for family contributions should be decreased to \$0.²⁶

3 **h. The Debtor Overstated the Amount of his Additional Food and**
4 **Clothing at Line 30.**

5 At Line 22 of Debtor's Means Test Form 122A-2, Debtor claimed an amount of \$57.00 for
6 additional food and clothing. The Debtor has failed to provide any justification for claiming the
7 additional expense above the IRS allowance on line 30 (\$1,700/month). As such, as reflected in the
8 U.S. Trustee Means Test, Debtor's average monthly deduction for additional food and clothing
9 should be decreased to \$0.²⁷

10 **i. The Debtor Overstated the Charitable Contributions at Line 31.**

11 At Line 31 of Debtor's Means Test Form 122A-2, Debtor claimed an amount of \$80.00 for
12 charitable contributions. The U.S. Trustee requested proof of such expense, however none was
13 provided. As such, based on the lack of any documentation, as reflected in the U.S. Trustee Means
14 Test, Debtor's average monthly deduction for charitable contributions should be decreased to \$0.²⁸

15 **f. The Debtor Understated the Chapter 13 Administrative Expense**
16 **at line 36.**

17 At Line 36 of Debtor's Means Test Form 122A-2, Debtor incorrectly calculated the Chapter
18 13 administrative expense as \$0. Line 36 of the Debtor's Means Test Form 122A-2 captures the
19 Chapter 13 administrative expense if Debtor's case is filed under Chapter 13. Here, the Chapter 13
20 Trustee would be responsible for making payments in the estimated amount of \$417.20 each month.
21 Therefore, based upon the U.S. Trustee's calculations, Debtor's monthly administrative expenses at
22 Line 36 should be \$417.20 (\$74,171.95 x 0.01%) instead of \$0.00 as calculated by the Debtor.²⁹

23 **3. Dismissal Is Justified Because the Presumption of Abuse Arises.**
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25

26 ²⁶ *Id.*

27 ²⁷ *Id.*

28 ²⁸ *Id.*

29 ²⁹ *Id.*

In sum, after adjusting the income and expenses as detailed above, the Debtor actually has at least **\$3,754.75** in monthly disposable income. The amount multiplied by 60 equals \$225,285.00 and exceeds \$43,168.00³⁰, as follows³¹:

Income and Expense Deductions Listed by Debtor on his amended CMI and Means Test Forms 122A-1 & 122A-2	Income and Expense Deductions in the United States Trustee's CMI and Means Test Forms 122A-1 & 122A-2
\$12,140.83 Gross Wages, Line 12a (122A-1)	\$12,596.60 Gross Wages, Line 12a (122A-1)
\$145,689.96 Annual CMI, Line 12b (122A-1)	\$151,159.20 Annual CMI, Line 12b (122A-1)
\$1,875.57 Taxes, Line 16 (122A-2)	\$1,865.60 Taxes, Line 16 (122A-2)
\$33.17 Life insurance, Line 18 (122A-2)	\$28.22 Life insurance, Line 18 (122A-2)
\$450.00 Childcare, Line 21 (122A-2)	\$0.00 Childcare, Line 21 (122A-2)
\$400.00 Additional health care, Line 22 (122A-2)	\$0.00 Additional health care, Line 22 (122A-2)
\$222.00 Optional phone, Line 23 (122A-2)	\$0.00 Optional phone, Line 23 (122A-2)
\$321.38 Health insurance, Line 25 (122A-2)	\$334.96 Health insurance, Line 25 (122A-2)
\$95.10 Disability insurance, Line 25 (122A-2)	\$7.68 Disability insurance, Line 25 (122A-2)
\$80.78 Health Savings, Line 25 (122A-2)	\$87.19 Health Savings, Line 25 (122A-2)
\$100.00 Contributions to Family, Line 26 (122A-2)	\$0.00 Contributions to Family, Line 26 (122A-2)
\$57.00 Additional food and clothing expense care, Line 30 (122A-2)	\$0.00 Additional food and clothing expense care, Line 30 (122A-2)
\$80.00 Charitable contribution, Line 31 (122A-2)	\$0.00 Charitable contribution, Line 31 (122A-2)
\$0.00 Ch. 13 Administrative Expense Line 36 (122A-2)	\$417.20 Ch. 13 Administrative Expense Line 36 (122A-2)
\$0.00 All Debt Payment Line 37 (122A-2)	\$417.20 All Debt Payment Line 37 (122A-2)
\$9,816.00 Total deduction for debt payment Line 38 (122A-2)	\$8,841.85 Total deductions for debt payment Line 38 (122A-2)
\$2,324.83 Total Disposable Income Line 39c (122A-2)	\$3,754.75 Total Disposable Income Line 39c (122A-2)

Accordingly, the presumption of abuse arises in this case. The Court should therefore dismiss this case pursuant to § 707(b)(1), based upon the presumption of abuse that arises under § 707(b)(2).

³⁰ *Id.*

³¹ *Id.*

**C. Dismissal Pursuant to § 707(b)(3)(B) Under the Totality Of Circumstances Of
The Debtor’s Financial Situation Is Applicable and Demonstrates Abuse**

Alternatively, to the extent that this court is not inclined to find that the presumption of abuse arises under § 707(b)(2), this case should be dismissed as an abuse under § 707(b)(3)(B), based upon the totality of the circumstances surrounding the Debtor’s financial situation, because the Debtor has the ability to repay a sufficient amount of the scheduled unsecured debt.

In pertinent part, 11 U.S.C. § 707(b)(3) provides:

In considering under paragraph (1) whether the granting of relief would be an abuse of provisions of this chapter in a case in which the presumption in subparagraph (A)(I) of such paragraph does not arise or is rebutted, the court shall consider –

- (A) whether the debtor filed the petition in bad faith; or
- (B) the totality of the circumstances . . . of the debtor’s financial situation demonstrates abuse.

The Ninth Circuit determined that under § 707(b)(3)(b), “[e]ven if a debtor’s financial situation does not create a presumption of abuse (or if the presumption is rebutted), the bankruptcy court may still dismiss the petition if the debtor filed in bad faith or if the ‘totality of the circumstances’ demonstrates ‘abuse’ of Chapter 7.”³² Therefore, even if the Court finds that the presumption of abuse does not arise under § 707(b)(2), the Court should find that the totality of the circumstances warrant dismissal of this case under § 707(b)(3)(B).

**1. The Standard for Finding Abuse is Lower than Finding Abuse Under the Pre
BAPCPA³³ “Substantial Abuse” Standard.**

In 2005, Congress amended § 707(b) to replace and lower the standard of dismissal from “substantial abuse” to “abuse.” The legislative history of earlier bankruptcy reform legislation provides that courts have additional discretion under the “abuse” standard than under the “substantial abuse” standard.³⁴ A case that would have been dismissed under the old “substantial

³² *In re Egebjerg*, 574 F.3d 1045, 1048 (9th Cir. 2009).

³³ The Bankruptcy Abuse Prevention and Consumer Protection Act of 2005 (“BAPCPA”), which made certain modifications to the Bankruptcy Code, took effect on October 17, 2005.

³⁴ *See* 146 Cong. Rec. S11683-11729, Dec. 2000 (stating “since the standard is ‘abuse’ rather than ‘substantial abuse,’ the courts are clearly given additional discretion to control abusive use of

abuse” standard would still be dismissed under the new “abuse” standard.³⁵ In addition, cases that may not have been dismissed under the old “substantial abuse” standard may now be dismissed under the new “abuse” standard. In sum, the standard for dismissing under the revised § 707(b) is less stringent.³⁶

2. The Ability to Repay Unsecured Debts is Primary Ground for Dismissal Under the “Abuse” Standard of § 707(b)(3)(B).

Prior to BAPCPA, a chapter 7 case could be dismissed for “substantial abuse” under § 707(b) based on the debtor’s ability to repay.³⁷ It therefore follows that a Chapter 7 case should still be dismissed based on the debtor’s ability to repay under the lower standard of “abuse,” even if that ability is not presumed under the Chapter 7 Means Test Calculation.³⁸ Indeed, because the “abuse” standard of § 707(b)(3) expressly applies when the presumption of abuse under the Means

chapter 7 when that is appropriate . . .”). Although this legislative history pertains to an earlier version of bankruptcy reform legislation, the amendment to § 707(b) in the BAPCPA is substantially the same.

³⁵ See 146 Cong. Rec. S11683-11729, Dec. 2000 (stating “[i]f a debtor’s case would be dismissed today for ‘substantial abuse’ as in *In re Lamanna*, 153 F. 3d 1 (1st Cir. 1998), it is intended that the case should be subject to dismissal under H.R. 2415”).

³⁶ *In re Haney*, 2006 WL 3020961, *2, *unpublished slip copy*, (Bankr. W.D. Ky. October 19, 2006) (“the standard to be shown for dismissal under the revised 11 U.S.C. § 707(b) has been lowered from substantial abuse to just simple abuse”); *In re James*, 345 B.R. 664, 667 (Bankr. N.D. Iowa 2006) (“Congress in BAPCPA reduced the test for dismissal from ‘substantial abuse’ to ‘abuse’”); *In re Colgate*, 370 B.R. 50, 54 (Bankr. E.D.N.Y. 2007) (“BAPCPA made significant changes to this section of the Bankruptcy Code, making it easier to find that a debtor’s case should be dismissed. First, in subsection (b)(1), the standard for dismissal of the case has been reduced from ‘substantial abuse’ to ‘abuse’”).

³⁷ See e.g. *In re Price*, 353 F. 3d 1135 (9th Cir. 2004).

³⁸ *In re Fox*, 521 B.R. 520, 531 (Bankr. D. Md. Nov. 12, 2014) [The court found the debtor’s ability to pay creditors must be given greater weight under section 707(b)(3)(B) than that factor was given prior to the BAPCPA amendments to section 707(b). Finding that *In re Green*, 934 F.2d 568 (4th Cir. 1991) (holding that ability to repay is not enough to justify dismissal for “substantial abuse”) had been superseded by the 2005 amendments to the Bankruptcy Code, changing the standard from “substantial abuse” to “abuse;” eliminated the presumption that chapter 7 relief was appropriate; and limited the “totality of the circumstances” test to one which considers “the debtor’s financial condition.” In addition, by providing alternative grounds for dismissal based on either bad faith (section 707(b)(3)(A)) or the “totality of the circumstances . . . of the debtor’s financial condition,” Congress had made clear that courts could dismiss cases for abuse without a finding of bad faith.]

1 Test does not arise, "passing" the Means Test cannot preclude a discretionary finding of abuse by
2 the court.³⁹

3 In considering the "totality of the circumstances," a number of cases have held that debtor's
4 actual ability to repay unsecured debts is an important factor in determining whether the case is
5 abusive.⁴⁰ Indeed, courts across the country have determined that the debtor's ability to repay may
6 be the sole grounds for demonstrating abuse under a totality of the circumstances analysis.⁴¹
7 Therefore, this court should consider whether the Debtor has an ability to pay as an important part
8 of the totality of the circumstances of the Debtor's financial condition, and dismiss this case as
9 "abusive" if the Debtor has the ability to repay a significant portion of the unsecured debt.

10 **3. CMI Amounts Set Forth in § 707(b)(2) Establish Guideline Standards for**
11 **"Ability to Pay" Under the "Totality of the Circumstances" Test Pursuant to §**
12 **707(b)(3)(B)**

13 While section 707(b)(3)(B) does not establish a minimum repayment percentage required to
14 find that the totality of circumstances demonstrate abuse, case law has established that courts
15 should find abuse under § 707(b)(3) where a given debtor's monthly disposable income exceeds the
16 threshold amount of monthly disposable income considered to be presumptively abusive. In cases
17 like *In re Pak*, the Northern District of California Bankruptcy Court found that even where a
18

19 ³⁹ See *Calhoun v. United States Trustee*, 650 F.3d 338, at 342 (4th Cir. 2011) (stating that the means
20 test is not conclusive and a court may still find abuse under § 707(b)(3) even if there is no
21 presumption under § 707(b)(2)).

22 ⁴⁰ See e.g. *Calhoun*, 650 F.3d 338 (dismissing the debtors' case under § 707(b)(3) because they
23 were able to pay their creditors based on the totality of the circumstances of their financial
24 situation); *In re Ross-Tousey*, 549 F.3d 1148, 1162 (7th Cir. 2008) (stating that the court can take
25 into consideration a debtor's actual income and expenses under a totality of the circumstances
26 analysis under § 707(b)(3)); *In re Baeza*, 398 B.R. 692 (Bankr. E.D. Cal. 2008) (stating that a court
27 must consider a debtor's actual financial situation under the plain meaning of § 707(b)(3)(B)).

28 ⁴¹ See *In re Reed*, 422 B.R. 214 (C.D. Cal. 2009) (holding that the debtor's ability to repay is, by
itself, sufficient to find abuse under the totality of the circumstances test under § 707(b)(3)); *In re*
Lowe, 561 B.R. 688, 692 (Bankr. N.D. Ill. Dec. 29, 2016) [The court granted the United States
Trustee's motion to dismiss under § 707(b)(3)(B) based entirely on the debtor's ability to pay
creditors]; *In re Gourley*, 549 B.R. 210 (Bankr. N.D. Iowa 2016) [Granting U.S. Trustee's motion
to dismiss for abuse under section 707(b)(3)(B), based on the debtors' ability to pay creditors, the
court noted that, in the Eighth Circuit, ability to pay by itself may constitute cause for dismissal].

1 debtor's monthly income was below the applicable median income, the court should review the
2 debtor's ability to repay his debts under the totality of the circumstances prong of § 707(b)(3)(B).⁴²
3 In doing so, the court considered actual and anticipated future income of the debtor.⁴³ After
4 reviewing the debtor's actual monthly expenses and projected monthly disposable income, the court
5 concluded that the debtor had the ability to repay 19% of his unsecured debt.⁴⁴ In concluding that it
6 would be abusive to grant relief when the debtor could repay 19% of his unsecured debts to
7 creditors, the court noted that (1) the standard is "abuse" not "substantial abuse," (2) the actual
8 amount of repayment, \$33,497.28, was still a large amount, and (3) some of the debtor's expenses
9 were excessive.⁴⁵

10 Other courts have held that the "abuse threshold" contained in § 707(b)(2)(A) is helpful to
11 determine whether a case should be dismissed for abuse under § 707(b)(3)(B).⁴⁶ Implementing
12 BAPCPA, courts have determined that, at a minimum, it is an abuse to grant relief in a Chapter 7
13 case when the debtor's ability to repay exceeds a 25% threshold where abuse is presumed.⁴⁷

14 However, while the threshold repayment percent is helpful, it is not required to demonstrate
15 that a particular case is abusive under the totality of a given debtor's financial circumstances. *See*
16 *In re Jones*, 556 B.R. 327 (Bankr. E.D. Mich. Aug. 24, 2016) [In a Chapter 7 case filed in lieu of a
17 Chapter 13, in part, because under chapter 13, after paying all unsecured creditors pro rata, debtor
18 would have still owed \$37,000 in interest on her nondischargeable student loans, the court granted
19

20 ⁴² *In re Pak*, 343 B.R.239, 241-44 (Bankr. N.D. Cal. 2006).

21 ⁴³ *Pak*, 343 B.R. at 245-46; *see also In re Maya*, 374 B.R. 750, 754 (Bankr. S.D. Cal. 2007) (stating
22 that post-petition events or circumstances should be considered under a § 707(b)(3)(B) analysis).

23 ⁴⁴ *Pak*, 343 B.R. at 246.

24 ⁴⁵ *Id.*

25 ⁴⁶ *See In re Mestemaker*, 359 B.R. 849 (Bankr. N.D. Ohio 2007) [Court granted the U.S. Trustee's
26 motion to dismiss under § 707(b)(3) where the debtor's ability to pay exceeded the abuse threshold
27 contained in § 707(b)(2)(A)(I)]; *In re Pennington*, 348 B.R. 647 (Bankr. D. Del. 2006) [Court held
28 that granting chapter 7 relief would constitute an abuse where the debtor could repay 42% of his
unsecured debt in a three-year plan and 69% of his unsecured debt in a five-year plan, which is
significantly above the 25% threshold for presumption of abuse]; *In re Mondragon*, 2007 WL
2461616 (Bankr. D.N.M. Aug. 24, 2007) [Court held that "a debtor's ability to repay 25% or more
of his or her unsecured non-priority debts is persuasive evidence that allowing the debtor to proceed
under Chapter 7 would constitute an abuse." *Mondragon*, 2007 WL 2461616, at *6.

⁴⁷ *Id.*

1 U.S. Trustee's motion for dismissal under § 707(b)(3)(B) because the debtor had the ability to pay
2 all creditors a 20% dividend in chapter 13.]

3 In reviewing the "totality of the circumstances . . . of the debtor's financial situation," the
4 court should consider the Debtor's ability to pay. In determining when the Debtor's ability to pay
5 demonstrates abuse, the court should find abuse if the Debtor's ability to pay rises above the
6 presumptively abusive level set by Congress in § 707(b)(2) of \$214.17 per monthly disposable
7 income or at least \$128.33 per monthly disposable income that can pay at least 25% of the Debtor's
8 nonpriority unsecured debt in five years.

9 **4. The Debtor has the Ability to Repay Unsecured Debt and the Court Should**
10 **Dismiss this Case as Abusive**

11 In this case, dismissal is warranted under § 707(b)(3)(B) because the record shows that the
12 Debtor can repay a sufficient portion of the scheduled unsecured debt. As set forth above, after
13 adjustment to the Debtor's income and expenses, the Debtor's Form 122A-1 reflects that the Debtor
14 has \$3,754.75 per month in disposable income which, when multiplied by 60, would equal debt
15 payment of \$225,285. Alternatively, the Debtor has sufficient disposable income to pay 100% of
16 his unsecured debt in 12 months.

17 **a. The Debtor's Schedules Show that the Debtor has the Ability to Repay**
18 **the Scheduled Unsecured Debts.**

19 Similarly, based on a review of the Debtor's Schedules I and J, the Debtor has the ability to
20 repay her creditors under § 707(b)(3)(B).

21 In determining the amount of disposable income that a debtor would have available to repay
22 a sufficient amount to creditors under § 707(b), the Court is not bound by the debtor's actual
23 expenses. The Court may correctly reduce the expenses to those reasonable for necessities and then
24 forecast a repayment plan based on the reduced expenses.⁴⁸ While "reasonably necessary

25 _____
26 ⁴⁸ See *In re MacNamara*, 2009 WL 1606985, at *3 (Bankr. M.D. Pa. June 5, 2009) (dismissing the
27 debtors' case under § 707(b)(3)(B) after eliminating unnecessary expenses such as the automobile
28 insurance premiums, cellular phone bills for the debtors' adult children, and the premiums for life
insurance policies); *In re Hoffman*, 413 B.R. 191, 195 (Bankr. M.D. Pa. 2008) (dismissing the
debtor's Chapter 7 case after finding that the debtor's monthly housing expense was excessive and

1 expenses” are determined on a “case by case basis,” courts have generally ruled that “reasonable”
2 amounts are permissible for “essential” expenses such as food, clothing, shelter, utilities and other
3 necessities.⁴⁹

4 In addition to the inaccuracies previously noted in Debtor’s Means Test, the U.S. Trustee
5 notes the following excessive items, which reflect that Debtor would also have the ability to repay
6 her creditors under a totality of the circumstances analysis as follows⁵⁰:

7 **(1) Income**

8 The Debtor has listed monthly gross wages for her non-filing spouse as \$5,924.97.
9 According to the pay advices provided by the Debtor for her non-filing spouse for the bi-weekly
10 pay period ending dates covering September 01, 2023 through and including April 12, 2024, the
11 Debtor’s non-filing spouse’s salary for the bi-weekly period starting pay date November 9, 2023
12 was consistently \$2,734.60 per period, for 26 pay periods per year, that amounts to \$5,924.97 per
13 month

14 **(2) Payroll Deductions.**

15 The Debtor has listed \$2,113.37 in payroll deductions for tax, Medicare and social security
16 However, the Debtor’s pay advices reflect \$2,517.45. As such, the accurate tax deductions should

17
18 unreasonable); *In re Ricci*, 456 B.R. 89 (Bankr. M.D. Fla. 2009) (“The payout to unsecured
19 creditors would increase dramatically if the Debtors’ budget included only reasonable and
20 necessary expenses”); *In re Durczynski*, 450 B.R. 880, 885 (Bankr. N. D. Ohio 2009) (dismissing
21 the debtors’ case under § 707(b)(3)(B) after finding that the debtors could do some “belt tightening”
22 by moving from a home that consumed 40% of their income or reducing the alleged monthly food
23 expense of \$1,150).

24 ⁴⁹ See *Ricci*, 2009 WL 3381517, at * 16 (“A budget is unreasonable where a debtor’s expenditures
25 manifest a desire to maintain a standard of living which precipitated the bankruptcy filing”);
26 *Hoffman*, 413 B.R. at 195 (considered “whether the debtor’s expenses can be reduced significantly
27 without depriving him of adequate food, clothing, shelter and other necessities” in determining the
28 debtor’s ability to repay); *MacNamara*, 2009 WL 1606985, at *2-3; *In re Gillead*, 171 B.R. 886,
891-92 (Bankr. E.D. Cal. 1994) (holding that the debtors’ expenses related to cable television, work
lunches, entertainment, periodicals, spring water, and a health club membership were discretionary
and not necessary); *In re Attanasio*, 218 B.R. 180, 210 fn. 30 (Bankr. N.D. Ala. 1998); *In re Kelly*,
841 F.2d 908 (9th Cir. 1988) (stating that expenses for going out to dinner, entertaining, buying
toys for the children or going to the movies were not reasonably necessary for the support of a
debtor or a dependent of the debtor). Although *Kelly* was a pre-BAPCPA “substantial abuse” case,
it indicates what expenses the Ninth Circuit would consider excessive under that higher standard.

⁵⁰ See *Fouche* Dec. at ¶19.

be \$2,517.45. The Debtor has listed \$682.62 in tax, medical, and social security deductions on Schedule J. This figure is not accurate under this analysis as the salary advices provided by the Debtor⁵¹ reflects a deduction rate of \$619.23 on a bi-weekly basis. Further, the U.S. Trustee's review of the Debtor's pay advices reflect a monthly deduction of \$28.84 for life insurance.

Therefore, the total monthly take home pay for the Debtor should be increased from \$8,909.89 to \$9,009.46, as summarized in the chart below:

Monthly Income and Payroll Deductions Listed by Debtor on Amended Schedule "I"	Combined Income, Deductions under § 707(b)(3) Totality of the Circumstances Analysis
\$ 6,250.01 Debtor's Monthly gross wages, Line 4	\$ 6,250.01 Debtor's Monthly gross wages, Line 4
\$ 5,455.87 Debtor's non-filing spouse Monthly gross wages, Line 4	\$ 5,924.97 Debtor's non-filing spouse Monthly gross wages, Line 4
\$ 2,113.37 Tax, Medicare, Social Security deductions, Line 5a.	\$ 2,517.45 Tax, Medicare, Social Security deductions, Line 5a.
\$ 682.62 Insurance, Line 5e.	\$ 619.23 Insurance, Line 5e.
\$ 0.00 Life Insurance, Line 5g.	\$ 28.84 Life Insurance, Line 5g.
\$ 8,909.89 Total Monthly Income	\$ 9,009.46 Total Monthly Income

(2) Expenses.

Additionally, by correcting adjustments to some of the Debtor's scheduled expenses, as outlined in the UST Analysis section below (which are either unnecessary, unsubstantiated or discretionary), the Debtor has \$1,100.21 of disposable income (after the payment of a chapter 13 administrative fee), or \$66,012.60 over 60 months to fund a chapter 13 plan, resulting in a repayment of over 100% of the Debtor's unsecured debt in sixty months.⁵²

The UST Analysis applies the following changes:

- **Clothing, Laundry and Drycleaning:** Debtor claimed a monthly deduction of \$250, however no documentation was provided in support for such. As a result, the U. S. Trustee adjusted the expense to the IRS National Standard of \$207.00 per month.⁵³

⁵¹ See *Id.*

⁵² *Id.*

⁵³ *Id.*

- 1 • **Personal Care Products:** Debtor claimed a monthly deduction of \$250, however no
2 documentation was provided in support for such. As a result, the U. S. Trustee adjusted
3 the expense to the IRS National Standard of \$91.00 per month.⁵⁴
- 4 • **Medical and Dental Expenses:** Debtor claimed a monthly deduction of \$400, however
5 no documentation was provided in support for such, beyond one dental bill for \$1,650
6 for the period covering September 1, 2023 to April 30, 2024, that's an average expense
7 of \$206.25 per month for the requested eight (8) months. As a result, the U. S. Trustee
8 adjusted the expense to the \$206.25 per month.⁵⁵
- 9 • **Vehicles:** Debtor claimed a monthly deduction of \$1,100 for vehicles. Debtor's
10 Schedule A/B however reflected the Debtor owned two vehicles: 2008 Honda Fit, worth
11 \$1,000.00 (Non-filing property), and a 2004 Chevrolet Colorado, worth \$1,000.00.
12 However, at the time of filing, the Debtor had no vehicle expense as no secured debt for
13 these vehicles was listed. As a result, the U. S. Trustee adjusted the expense to the \$0
14 per month.

15 All other deductions claimed by Debtor remains unchanged. As noted by the UST Analysis,
16 with these adjustments Debtor's monthly expenses would be adjusted to \$7,787.00. As a result, the
17 Debtor's monthly net income as reflected on Schedule J would increase from negative \$179.11 to
18 \$1,222.46.⁵⁶

19 After payment of a projected Chapter 13 expense of \$122.25, the Debtor would have
20 \$1,100.21 per month in disposable monthly income, which over 60 months would equal \$66,012.60
21 or a projected repayment of 100% of his total unsecured debts in 60 months.⁵⁷

22 5. **Dismissal of the Debtor's Case is Warranted Under § 707(b)(3)(B)**

23 For the reasons set forth above and without adjusting any of the Debtor's present expenses,
24 the U.S. Trustee has demonstrated that Debtor has the ability to repay a substantial portion of her
25 debt over a five-year period because Debtor has approximately \$1,222.46 in disposable monthly

26 ⁵⁴ *Id.*

27 ⁵⁵ *Id.*

28 ⁵⁶ *Id.*

⁵⁷ *Id.*

1 income available under the totality of the circumstances analysis. Accordingly, it would be an
2 abuse of chapter 7 to discharge the Debtor's debts when she clearly has the ability to repay a
3 sufficient amount to her creditors.

4 **V. DEBTOR'S CASE WAS FILED IN BAD FAITH AND WARRANTS DISMISSAL**
5 **WITH A 180-DAY BAR**

6 During the Debtor's 341(a) meeting the Debtor testified that the \$9,000.00 in her savings
7 account was savings for a new car because their current vehicle, the 2008 Honda Fit was breaking
8 down. The Trustee asked about the source of the savings, per the Debtor it was from her husband's
9 wages. On June 20, 2024, after the U.S. Trustee had filed its statement of presumed abuse, the
10 Debtor filed amended Schedules I and J, as well as an amended Means Test. The Debtor also filed a
11 Rebuttal of Presumption of Abuse ("Rebuttal") in response stating that they were struggling to
12 make minimum payments on their debts and had saved approximately \$10,000 for a down payment
13 for a vehicle.⁵⁸

14 Per the Debtor's Rebuttal, the Debtor is in the process of purchasing a new vehicle and
15 plans to replace the other vehicle with a newer, but still used vehicle. The U.S. Trustee reached out
16 to the Debtor to verify the purchase of the vehicles and to request the supporting documents. The
17 Debtor provided 4 documents in response: a Motor Vehicle Order agreement form for a new 2024
18 Tesla Model 3; a Navy Federal Credit Union pre-approved loan in the amount of \$37,000; an
19 estimate for a second vehicle, a 2019 Lexus RX hybrid in the amount of \$30,197.00; and an
20 Insurance Policy listing the 2008 Honda Fit and the 2024 Tesla Model 3.

21 The U.S. Trustee believes that the Debtor's post-petition purchase (and anticipated
22 purchase) of two luxury vehicles is not aligned with the bankruptcy process, especially since the
23 new vehicles would allow the Debtor to incur debts in excess of what their current Schedule E/F
24 lists. Further, the Debtor has not demonstrated why the purchase of two vehicles which are
25 drastically more upscale than the current vehicles is warranted. In fact, the U.S. Trustee did a
26 review of newer model versions of the Debtor's current vehicles and determined that the price of
27

28 ⁵⁸ See Case Docket (Docket #12).

1 such replacement vehicles is significantly lower than what the Debtor currently intends to
2 purchase.⁵⁹

3 As such, unless Debtor affirmatively proves that the new vehicle expense for a brand-new
4 high-end vehicle and a used high-end vehicle are necessary to the health and welfare of the Debtor,
5 the monthly expense should be denied or more affordable options should be pursued as the Debtor's
6 current Schedule E/F debt is a total of \$43,168.00, with the anticipated vehicle purchases (cost plus
7 financing costs) the Debtor will incur close to double the current Schedule E/F debt.

8 Even if the Court is willing to consider the Debtor's new vehicle expense, the U.S. Trustee
9 has calculated that if the Debtor's new car payment is \$500, the Debtor's monthly net income
10 would decrease from \$1,222.46 to \$722.46 and after payment of projected Chapter 13
11 administrative expenses in the amount of \$72.25 (\$722.46 x 0.01%) results in \$650.21 a month to
12 repay Schedule E/F unsecured debt in the amount of \$43,168.00. The Debtor will be able to repay
13 \$39,012.57 of the Schedule F debt of \$43,168.00 (90.37%) in 60 months.

14 Finally, given the Debtor's post-petition actions in an attempt to not pay his creditors and
15 incur additional debts which are in excess of the Schedule E/F debts, the U.S. Trustee believes a bar
16 to refiling is warranted here.

17 **VI. IN THE ALTERNATIVE, IF A MOTION TO DISMISS PURSUANT TO §707(b)(2)**
18 **OR (3) IS NOT GRANTED, THE U.S. TRUSTEE REQUESTS AN ORDER**
19 **EXTENDING THE BAR DATE FOR THE FILING OF A COMPLAINT FOR THE**
20 **DENIAL OF DISCHARGE UNDER §727**

21 Federal Rules of Bankruptcy Procedure 4004(a) and 1017(e)(1) control the time frames for
22 the filing of a complaint under § 727 of the Bankruptcy Code. These Rules provide in a Chapter 7
23 case that such a complaint shall be filed no later than sixty (60) days following the first date set for
24 the § 341(a) Meeting of Creditors. Pursuant to FRBP 4004(b) and 1017(e)(1), this Court may
25 extend the bar date for filing complaints objecting to the debtors' discharge if the motion to extend
26 time is filed before the 60-day time period has expired.

27
28 ⁵⁹ See Fouche Dec. at Exhibit 14.

1 As reflected on the Debtor's bankruptcy petition, the first date set for the § 341(a) Meeting
2 of Creditors was May 21, 2024, and thus the deadline for filing a complaint under § 727 or a motion
3 to extend the bar date is July 22, 2024. Thus, this motion is timely filed.

4 The U.S. Trustee is currently and has been diligently investigating this matter regarding
5 potential violations of Bankruptcy Code § 707(b)(2) and (3), and § 727. The U.S. Trustee's
6 analysis of the case to date has led to the conclusion that a motion under § 707(b)(2) and (3) is the
7 appropriate action to take with respect to the Debtor's abusive chapter 7 filing. However, in the
8 event that the underlying case is not dismissed as requested herein, as alternative relief the U.S.
9 Trustee further requests that the Court extend the bar date for filing a § 727 complaint to deny the
10 debtor's discharge, by approximately 120 days, up to and including Friday, November 22, 2024, to
11 provide the U.S. Trustee with the opportunity to complete his pending investigation, including
12 formal discovery and a Rule 2004 examination, to obtain additional testimony and/or other
13 evidence produced by the Debtor or other parties in interest.

14 **VI. CONCLUSION**

15 WHEREFORE, the United States Trustee prays that, pursuant to § 707(b)(1), the Court
16 dismiss this case and for such other and further relief as is just.

17
18 DATED: July 2, 2024

Respectfully submitted,
PETER C. ANDERSON
UNITED STATES TRUSTEE

20
21 /s/ Noreen A. Madoyan

By: Noreen A. Madoyan
Trial Attorney

DECLARATION OF MARLENE FOUCHE

I, MARLENE FOUCHE, declare and state as follows:

1. I am over the age of eighteen years, and if called upon to testify I could and would do so competently. I am employed as a Bankruptcy Auditor by the Office of the United States Trustee for the Central District of California, in the Los Angeles Field Office. I have been so employed since March 2021. I am the Auditor assigned to In Re **GLADYS GRACE LIAD VILLACORTA**, Case No. **2:24-bk-13211 DS**. I have personal knowledge of the facts set forth herein and based on that personal knowledge I assert that all such facts are true and correct to the best of my knowledge. To the extent I rely on other admissible evidence rather than on personal knowledge, I will specifically so state.

2. The docket indicates that Gladys G.L. Villacorta (“Debtor”) filed a voluntary Chapter 7 petition, schedules A/B-J, a statement of financial affairs, and related case commencement documents on April 25, 2024. The docket indicates further that the Debtor is represented by Benjamin Heston (“Counsel”) and the Chapter 7 Trustee appointed to the case is Heide Kurtz. A true and correct copy of the docket is attached hereto as **Exhibit “1”**.

3. Debtor’s Declaration as to Whether Debtor(s) Received Income from an Employer with 60 days of Petition (LBR Form F1002-1), also filed on April 25, 2024, included 4 pay advices for the Debtor, for the following pay dates: April 12, 2024, March 29, 2024, March 15, 2024, and March 01, 2024 of the lookback period.¹

4. The initial Meeting of Creditors pursuant to 11 U.S. C. § 341(a) was commenced on May 21, 2024. The meeting was continued to May 30, 2024 and concluded on the same day.²

5. The Debtor indicated in the Petition that the nature of the debt is primarily consumer debts.³ See Debtor’s Petition, Part 6, item #16.

¹ See Case Docket (Docket # 4).

² See Case Docket (Docket # 5).

³ See Case Docket (Voluntary Petition).

1 6. On behalf of the U.S. Trustee, and in the course and scope of my regular duties, I
2 reviewed the Debtor's petition, schedules, Chapter 7 Means Test documents and statements filed
3 with the U.S. Bankruptcy Court. In the Chapter 7 Means Test filed by the Debtor on April 25,
4 2024, the Debtor's annualized CMI was disclosed as \$111,047.40, or \$9,253.95 per month, for a
5 household of three (3). *See* Debtor's Form 122A-1, line 12 and Form 122A-2, line 1.⁴

6 7. Similarly, Schedule I listed Debtor's current monthly gross salary as \$6,250.01 and
7 the Debtor's non-filing spouse's current monthly gross salary as \$5,455.87 for a sum total of
8 \$11,705.88 for a household of three (3) members.⁵

9 8. In order to verify the household income and monthly expenses, I sent an inquiry
10 letter to Debtor's Counsel via email on May 08, 2024, requesting a response by May 20, 2024. A
11 true and correct copy of said email is attached hereto as **Exhibit "2"** and is incorporated herein as
12 if set forth in full.

13 9. On May 08, 2024, Debtor provided a partial response with documents. Counsel also
14 disclosed information regarding the Debtor's vehicle situation, according to Counsel, the Debtor
15 is "currently using other people's vehicles which are falling apart and have very high expenses
16 associated with that. They are going to be purchasing new vehicles soon and will almost certainly
17 have to finance the purchases." A true and correct copy of said response is attached hereto as
18 **Exhibit "3"** and is incorporated herein as if set forth in full. The Debtor's responses included four
19 (4) responsive documents. Exhibit "3" includes the responsive documents relevant to our motion.

20 10. On May 21, 2024, I attended the initial Meeting of Creditors. The Debtor testified
21 that her husband saved funds for a new vehicle. The Debtor further testified that they are currently
22 borrowing a vehicle from her husband's dad, and they are not paying anything to use the vehicle.
23 I reminded Counsel that the UST is still waiting for the remainder of the requested documents. A
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27 ⁴ *See Case Docket (Official Form 122A-1).*

28 ⁵ *See Case Docket (Schedule I).*

1 true and correct copy of the transcript of the mentioned 341(a) creditor's meeting is attached hereto
2 as **Exhibit "4"** and is incorporated herein as if set forth in full.

3 11. On May 28, 2024, the Debtor responded with additional documents. A true and
4 correct copy of said response is attached hereto as **Exhibit "5"** and is incorporated herein as if set
5 forth in full. The Debtor's response included nine (9) responsive documents. Exhibit "5" includes
6 the responsive documents relevant to our motion. The Debtor's tax returns are not included in
7 Exhibit "5" but are available upon request.

8 12. On May 29, 2024, I sent an e-mail to Counsel with our findings and a side-by-side
9 comparison of the Debtor's and the U.S. Trustee's Means Test, requesting a response by June 4,
10 2024. A true and correct copy of said email chain is attached hereto as **Exhibit "6"** and is
11 incorporated herein as if set forth in full.

12 13. On June 05, 2024, I sent a follow up e-mail to Counsel asking for an update on the
13 response to my e-mail dated May 29, 2024. A true and correct copy of said email chain is attached
14 hereto as **Exhibit "7"** and is incorporated herein as if set forth in full.

15 14. On June 05, 2024, Counsel responded that he plans to file an amended Means Test
16 that will confirm the presumption of abuse as well as a declaration rebutting the presumption.⁶

17 15. On June 06, 2024, the U.S. Trustee filed a timely Statement of Presumed Abuse
18 with the U.S. Bankruptcy Court.⁷

19 16. On June 20, 2024, Counsel filed The Debtor's rebuttal of presumption of abuse as
20 well as an Amended Schedule I, an Amended Schedule J, Summary of Assets and Liabilities
21 (Official Form 106Sum or 206Sum), Declaration About an Individual Debtor's Schedules (Official
22 Form 106Dec), Chapter 7 Statement of Your Current Monthly Income (Official form 122A-1),
23 and the Chapter 7 Means Test Calculation (Official form 122A-2).⁸

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26 ⁶ See Exhibit "7" U.S. Trustee inquiry.

27 ⁷ See Case Docket (Docket # 10).

28 ⁸ See Case Docket (Docket # 12, # 13).

1 17. My review and analysis of the underlying petition and schedules show that Debtor's
2 Schedule A/B disclosed no ownership interest in real property, two (2) vehicles: a 2008 Honda Fit,
3 worth \$1,000.00 (Non-filing spouse's property), and a 2004 Chevrolet Colorado, worth \$1,000.00,
4 personal belongings, seven (7) bank accounts, and two (2) retirement accounts.⁹

5 18. Schedule D disclosed no secured debt.¹⁰

6 19. Schedule E/F disclosed unsecured debt in the amount of \$43,168.00.¹¹

7 20. Schedule G disclosed no unexpired leases.¹²

8 21. Schedule H disclosed no codebtors.¹³

9 22. Schedule I disclosed that the Debtor has been employed with Bay Design Group
10 for four (4) months, the Debtor's non-filing spouse has been employed by Hot Topic
11 Merchandising, the Debtor did not specify for how long.¹⁴ The Debtor submitted copies of pay
12 advices from her employer for the bi-weekly pay period ending dates covering December 03, 2023
13 through and including April 12, 2024. The Debtor also submitted copies of pay advices from her
14 non-filing spouse's employer for the bi-weekly pay period ending dates covering September 01,
15 2023 through and including April 12, 2024. For the Court's convenience, true and correct copies
16 of the Debtor's pay advices are collectively attached as part of **Exhibit "8"** hereto.

17 23. To properly calculate Debtor's actual gross monthly earnings, I personally prepared
18 a spreadsheet calculating the Debtor's estimated gross monthly income, payroll deductions and
19 monthly expenses for the six-month "look-back" period prior to the bankruptcy filing. A true and
20 correct copy of said spreadsheet is attached hereto as **Exhibit "9"** and is incorporated herein as if
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23 ⁹ See Case Docket (Voluntary Petition).

24 ¹⁰ See Case Docket (Voluntary Petition).

25 ¹¹ See Case Docket (Voluntary Petition).

26 ¹² See Case Docket (Voluntary Petition).

27 ¹³ See Case Docket (Voluntary Petition).

28 ¹⁴ See Case Docket (Voluntary Petition).

1 set forth in full. According to the pay advices, the Debtor's average gross monthly salary income
2 for the six-month "look-back" period prior to the bankruptcy filing was \$4,230.78 and the Debtor's
3 non-filing spouse's income for the six-month "look-back" period prior to the bankruptcy filing
4 was \$5,911.64 for a combined income of \$10,142.41, reflecting an annualized salary income of
5 \$121,709.04. In Addition, the Debtor's response dated May 28, 2024 disclosed additional income
6 of \$2,454.18¹⁵ that was not previously included on the Means Test filed on April 25, 2024. The
7 total combined annualized income for the Debtor is \$151,159.20 after taking the previously
8 undisclosed income into account.

9 24. Pursuant to the Debtor's amended Means Test, the Debtor's annualized CMI is
10 \$145,689.96. The Debtor included a previously undisclosed monthly amount of \$2,454.18 for the
11 Debtor's non-filing spouse as Net income from operating a business, profession, or a farm on Line
12 5.¹⁶ See Debtor's amended Form 122A-1, line 12b.

13 25. The applicable state median income for a household of three (3) persons, like the
14 Debtor claimed, is \$109,458.00. Accordingly, Debtor's CMI exceeds the applicable state median
15 family income amount.

16 26. According to my review of the Debtor's amended Means Test, the Debtor
17 overstated the expenses claimed on the amended Means Test.

18 27. At Line 16 of Debtor's amended Means Test Form 122A-2, the Debtor claimed an
19 average monthly payroll tax deduction of \$1,875.57. The U.S. Trustee's review of the monthly
20 payroll taxes deducted per the pay advices for the six-month "look-back" period prior to the
21 bankruptcy filing determined that the average payroll deductions was \$1,865.60.¹⁷ The Debtor's
22 tax returns (Debtor and Debtor's non-filing spouse are filing separately as Married filing
23
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26 ¹⁵ See Exhibit "5" Debtor's response on May 28, 2024.

27 ¹⁶ See Exhibit "5" Debtor's response on May 28, 2024.

28 ¹⁷ See Exhibit 9 Auditor's Spreadsheet,

Separately) for 2023 shows that the Debtor received a refund for 2023¹⁸, thus the Debtor's increased amount claimed on the amended Means Test Line 16 doesn't appear to be justified. Therefore, as reflected in the U.S. Trustee Means Test, Debtor's average monthly payroll deduction should be decreased to the actual payroll deduction of \$1,865.60.¹⁹

	Income per Tax return	Federal tax return	State Tax return
Debtor	\$50,619.00 includes Pensions and annuities of \$9,029.00	\$5,410.00 Refund	\$1,600.00 Refund
Non-filing Spouse	\$75,819.00 includes Capital loss of \$1,500.00	\$2,223.00 Owed	\$1,027.00 Owed
Combined totals	\$126,438.00	\$3,187.00 refund	\$573.00 refund

28. At Line 18 of the Debtor's amended Means Test Form 122A-2, Debtor claimed an amount of \$33.17 for Life Insurance. The U.S. Trustee's review of the monthly payroll deduction for Life Insurance per the pay advices provided for the six-month "look-back" period prior to the bankruptcy filing determined that the average payroll deduction for Life Insurance was \$28.22²⁰, a review of the Debtor's Amended Schedule J did not show any additional monthly Life Insurance expense. Therefore, as reflected in the U.S. Trustee Means Test, Debtor's average monthly Life Insurance deduction should be limited to \$28.22.

29. At Line 21 of the Debtor's amended Means Test Form 122A-2, Debtor claimed an average monthly Childcare expense of \$450.00. Despite requesting proof of the expense²¹, Debtor did not provide the U.S. Trustee with proof of this expense.²² Furthermore, the Childcare amount is inconsistent, a review of the Debtor's Schedule J, filed on April 25, 2024, showed an amount of

¹⁸ Debtor's 2023 Federal and State tax returns are available upon request.

¹⁹ See Exhibit "9" U.S. Trustee Auditor's Spreadsheet.

²⁰ See Exhibit "9" U.S. Trustee Auditor's Spreadsheet.

²¹ See Exhibit "2" U.S. Trustee Inquiry Letter.

²² See Exhibit "3" and Exhibit "5" Debtor's Responses.

1 \$350.00, however the Debtor's Amended Schedule J, filed on June 20, 2024, showed an amount
2 of \$450.00. Therefore, as reflected in the U.S. Trustee Means Test, Debtor's average Childcare
3 amount should be reduced to \$0.00.

4 30. At Line 22 of the Debtor's amended Means Test Form 122A-2, Debtor claimed
5 Additional health care expenses of \$400.00. In response to the U.S. Trustee's request for proof of
6 the claimed expense ²³, the Debtor provided the U.S. Trustee with one dental bill in the estimated
7 amount of \$1,650.00 for the period covering September 1, 2023 to April 30, 2024, that's an average
8 expense of \$206.25 per month for the requested eight (8) months. ²⁴ Per the Means Test, line 7,
9 the Debtor receives an out-of-pocket allowance of \$237.00 per month, this amount is more than
10 the Debtor's proof provided, therefore, as reflected in the U.S. Trustee Means Test, Debtor's
11 average Additional health care expense should be limited to \$0.00.

12 31. At Line 23 of the Debtor's amended Means Test Form 122A-2, Debtor claimed
13 Optional telephone expenses of \$222.00 per month. In response to the U.S. Trustee's request for
14 proof of the claimed expense ²⁵, the Debtor provided the U.S. Trustee with phone bills covering
15 the period September 1, 2023 to April 30, 2024, the calculated average expense is \$218.07 per
16 month for the requested eight (8) months. ²⁶ The Means Test, line 8, allows Debtors an IRS
17 allowance for Housing and utilities, including phone costs, of \$799.00 per month. ²⁷ The Debtor
18 did not provide justification for claiming the full expense as Optional telephone when the phone
19 expense when the Debtor is already receiving the IRS allowance on line 8 of the Means Test.
20 Therefore, as reflected in the U.S. Trustee Means Test, Debtor's average Optional phone expense
21 should be limited to \$0.00.

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24 ²³ See Exhibit "2" U.S. Trustee Inquiry Letter.

25 ²⁴ See Exhibit "3" and Exhibit "5" Debtor's Responses.

26 ²⁵ See Exhibit "2" U.S. Trustee Inquiry Letter.

27 ²⁶ See Exhibit "3" and Exhibit "5" Debtor's Responses.

28 ²⁷ See **Exhibit "10"** IRS allowance for Local Housing and Utilities.

1 32. At Line 25 of Debtor's amended Means Test Form 122A-2, Debtor claimed an
2 amount of \$321.38 for Health insurance, an amount of \$95.10 for Disability insurance, and an
3 amount of \$80.78 for Health Savings account. The U.S. Trustee's review of the monthly payroll
4 deduction for health insurance per the pay advices provided for the six-month "look-back" period
5 prior to the bankruptcy filing determined that the average payroll deductions were \$334.96 for
6 Health Insurance, \$7.68 for Disability insurance, and \$87.19 for Health Savings account.²⁸
7 Therefore, as reflected in the U.S. Trustee Means Test, Debtor's average monthly payroll
8 deduction should be \$334.96 for Health insurance, \$7.68 for Disability insurance, and \$87.19 for
9 Health Savings account.

10 33. At Line 26 of the Debtor's amended Means Test Form 122A-2, Debtor claimed an
11 average monthly Continuing contribution to the care of the household or family members of
12 \$100.00. Further review of the Debtor's Means Test Form 122A-2 filed on April 25, 2024 showed
13 no amount claimed on line 26, and the Debtor's amended Schedule J, filed on June 20, 2024 also
14 showed no monthly expense for Continuing contribution to the care of the household or family
15 members. The Debtor also did not provide proof of this expenses claimed. Therefore, as reflected
16 in the U.S. Trustee Means Test, Debtor's average monthly Continuing contribution to the care of
17 the household or family members amount should be limited to \$0.00.

18 34. At Line 30 of the Debtor's amended Means Test Form 122A-2, Debtor claimed
19 Additional food and clothing expenses \$57.00 per month. The Means Test, line 6, allows Debtors
20 an IRS allowance for Food, clothing and other items of \$1,700.00 per month.²⁹ The Debtor did
21 not provide justification for claiming the additional expense above the IRS allowance on line 30
22 of the Means Test. Therefore, as reflected in the U.S. Trustee Means Test, Debtor's Additional
23 food and clothing expense should be limited to \$0.00.

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27 ²⁸ See Exhibit "9" U.S. Trustee Auditor Spreadsheet.

28 ²⁹ See **Exhibit "11"** IRS National Standards for Allowable Living Expenses

1 35. At Line 31 of the Debtor's amended Means Test Form 122A-2, Debtor claimed an
2 average monthly Charitable Contribution deduction of \$80.00. Further review of the Debtor's
3 Means Test Form 122A-2 filed on April 25, 2024 showed no amount claimed on line 31, and the
4 Debtor's amended Schedule J showed no monthly expense for Charitable Contributions. The
5 Debtor also did not provide proof of this expenses claimed. Therefore, as reflected in the U.S.
6 Trustee Means Test, Debtor's average monthly charitable contribution amount should be limited
7 to \$0.00.

8 36. At Line 36 of Debtor's Means Test Form 122A-2, Debtor incorrectly calculated the
9 Chapter 13 administrative expense. Line 36 of the Debtor's Means Test Form 122A-2 captures
10 the Chapter 13 administrative expense if Debtor's case is filed under Chapter 13. Here, the Chapter
11 13 Trustee would be responsible for making payments in the estimated amount of \$4,171.95 each
12 month. Therefore, based upon my calculations, Debtor's monthly administrative expenses at Line
13 36 should be \$417.20 ($\$4,171.95 \times 0.01\%$) instead of \$0.00 as calculated by the Debtor.

14 37. Line 37 of Debtor's Means Test Form 122A-2 incorrectly captured the total
15 deductions related to debt payment. Based upon the aggregate of the above, the amount at line 37
16 should be \$417.20, not \$0.00, a difference of \$417.20. Thus, as demonstrated by the parallel entry
17 on the U.S. Trustee Means Test, the amount at Line 37 should be \$417.20.

18 38. Line 38 of Debtor's Means Test Form 122A-2 incorrectly captured the total of
19 allowed deductions which includes the sums from lines 24, 32 and 37 respectively. As reflected
20 on the U.S. Trustee's Means Test, the amount at line 24 is \$7,994.82, line 32 is \$429.83 and at line
21 37 is \$417.20. The resulting total sum at line 38 should be \$8,841.85, rather than \$9,816.00.

22 39. Line 39 of the Debtor's Means Test Form 122A-2 incorrectly calculated his
23 monthly disposable income for 60 months. Debtor's total current monthly income is \$12,140.83
24 with total deductions of \$9,816.00, which erroneously reflect a monthly disposable income of
25 \$2,324.83. Instead, my calculations show that Debtor's average monthly income is \$12,596.60
26 with total deductions in the amount of \$8,841.85, resulting in an average monthly excess income
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of \$3,754.75. Thus, as demonstrated by the parallel entry on the U.S. Trustee Means Test, the amount at line 39c is \$3,754.75, calculated as follows:

Income and Expense Deductions Listed by Debtor on his amended CMI and Means Test Forms 122A-1 & 122A-2	Income and Expense Deductions in the United States Trustee's CMI and Means Test Forms 122A-1 & 122A-2
\$12,140.83 Gross Wages, Line 12a (122A-1)	\$12,596.60 Gross Wages, Line 12a (122A-1)
\$145,689.96 Annual CMI, Line 12b (122A-1)	\$151,159.20 Annual CMI, Line 12b (122A-1)
\$1,875.57 Taxes, Line 16 (122A-2)	\$1,865.60 Taxes, Line 16 (122A-2)
\$33.17 Life insurance, Line 18 (122A-2)	\$28.22 Life insurance, Line 18 (122A-2)
\$450.00 Childcare, Line 21 (122A-2)	\$0.00 Childcare, Line 21 (122A-2)
\$400.00 Additional health care, Line 22 (122A-2)	\$0.00 Additional health care, Line 22 (122A-2)
\$222.00 Optional phone, Line 23 (122A-2)	\$0.00 Optional phone, Line 23 (122A-2)
\$321.38 Health insurance, Line 25 (122A-2)	\$334.96 Health insurance, Line 25 (122A-2)
\$95.10 Disability insurance, Line 25 (122A-2)	\$7.68 Disability insurance, Line 25 (122A-2)
\$80.78 Health Savings, Line 25 (122A-2)	\$87.19 Health Savings, Line 25 (122A-2)
\$100.00 Contributions to Family, Line 26 (122A-2)	\$0.00 Contributions to Family, Line 26 (122A-2)
\$57.00 Additional food and clothing expense care, Line 30 (122A-2)	\$0.00 Additional food and clothing expense care, Line 30 (122A-2)
\$80.00 Charitable contribution, Line 31 (122A-2)	\$0.00 Charitable contribution, Line 31 (122A-2)
\$0.00 Ch. 13 Administrative Expense Line 36 (122A-2)	\$417.20 Ch. 13 Administrative Expense Line 36 (122A-2)
\$0.00 All Debt Payment Line 37 (122A-2)	\$417.20 All Debt Payment Line 37 (122A-2)

\$9,816.00 Total deduction for debt payment Line 38 (122A-2)	\$8,841.85 Total deductions for debt payment Line 38 (122A-2)
\$2,324.83 Total Disposable Income Line 39c (122A-2)	\$3,754.75 Total Disposable Income Line 39c (122A-2)

40. With \$3,754.75 in disposable monthly income, my calculations reflect that Debtor could repay 100% of the Debtor's Schedule E/F debt of \$43,168 in 60 months, in fact the total debt can be paid off in 12 months. Based upon the foregoing, the presumption of abuse arises.

41. The Debtor filed an amended Means Test on June 20, 2024, after the U.S. Trustee reach out to the Debtor³⁰ regarding the presumption of abuse, amending the Means Test to show an agreement with the U.S. Trustee that the presumption of abuse arises.

42. I prepared a U.S. Trustee Means Test using the numbers obtained from the pay advices and the expenses discussed in above paragraph 27 through paragraph 39. A true and correct copy of said Means Test (Form 122A-1 and Form 122A-2) is attached hereto as **Exhibit "12"** and is incorporated herein as if set forth in full.

43. In addition to the inaccuracies previously noted in Debtor's amended Means Test, I also noticed under-reported income and deductions on Debtor's Schedule I, which reflect that Debtor has the ability to repay her creditors under a totality of the circumstances analysis.

44. As more fully detailed herein and summarized in the table below, the following income, at the levels listed on Debtor's Schedule "I" should be adjusted under a totality of the circumstances analysis to include the undisclosed income from the non-filing Spouse:

Monthly Income and Payroll Deductions Listed by Debtor on Amended Schedule "I"	Combined Income, Deductions under § 707(b)(3) Totality of the Circumstances Analysis
\$ 6,250.01 Debtor's Monthly gross wages, Line 4	\$ 6,250.01 Debtor's Monthly gross wages, Line 4

³⁰ See Exhibit "6" U.S. Trustee Inquiry.

\$ 5,455.87 Debtor's non-filing spouse Monthly gross wages, Line 4	\$ 5,924.97 Debtor's non-filing spouse Monthly gross wages, Line 4
\$ 2,113.37 Tax, Medicare, Social Security deductions, Line 5a.	\$ 2,517.45 Tax, Medicare, Social Security deductions, Line 5a.
\$ 682.62 Insurance, Line 5e.	\$ 619.23 Insurance, Line 5e.
\$ 0.00 Life Insurance, Line 5g.	\$ 28.84 Life Insurance, Line 5g.
\$ 8,909.89 Total Monthly Income	\$ 9,009.46 Total Monthly Income

45. At line 4 of the Debtor's Amended Schedule I, the Debtor listed the monthly gross wages for her non-filing spouse as \$5,924.97. According to the pay advices provided by the Debtor for her non-filing spouse for the bi-weekly pay period ending dates covering September 01, 2023 through and including April 12, 2024, the Debtor's non-filing spouse's salary for the bi-weekly period starting pay date November 9, 2023 was consistently \$2,734.60 per period, for 26 pay periods per year, that amounts to \$5,924.97 per month, the Debtor had \$5,455.87 per month.³¹

46. At line 5a of the Debtor's Amended Schedule I, the Debtor listed the payroll deductions for Tax, Medicare, and Social Security as \$2,113.37 per month. According to the pay advices provided by the Debtor for the bi-weekly pay period ending dates covering December 03, 2023 through and including April 12, 2024, the Debtor's salary and payroll deduction for Tax, Medicare, and Social Security for the bi-weekly period starting pay date January 19, 2024 was consistently \$2,884.62 (salary) and \$660.96 (Tax, Medicare, and Social Security) per period, for 26 pay periods per year, that amounts to \$1,432.08 per month for Tax, Medicare, and Social Security.³² According to the pay advices provided by the Debtor for her non-filing spouse for the bi-weekly pay period ending dates covering September 01, 2023 through and including April 12, 2024, the Debtor's non-filing spouse's salary for the bi-weekly period starting pay date November 9, 2023 was consistently \$500.94 per period, for 26 pay periods per year, that amounts to

³¹ See Exhibit "9" U.S. Trustee Auditor's Spreadsheet.

³² See Exhibit "4" U.S. Trustee Auditor's Spreadsheet.

1 \$1,085.37 per month.³³ That amounts to a total combined payroll deduction for Tax, Medicare,
2 and Social Security of \$2,517.45 per month.

3 47. At line 5e of the Debtor's Amended Schedule I, the Debtor listed the payroll
4 deductions for Insurance as \$682.62 per month. According to the pay advices provided by the
5 Debtor for the bi-weekly pay period ending dates covering December 03, 2023 through and
6 including April 12, 2024, the Debtor's payroll deduction for health insurance for the bi-weekly
7 period starting pay date January 19, 2024 was consistently \$111.08 per period, for 26 pay periods
8 per year, that amounts to \$240.67 per month for Health insurance.³⁴ According to the pay advices
9 provided by the Debtor for her non-filing spouse for the bi-weekly pay period ending dates
10 covering September 01, 2023 through and including April 12, 2024, the Debtor's non-filing
11 spouse's bi-weekly consistent payroll deduction for Health insurance was \$128.85, disability
12 insurance was \$3.56, and Health savings accounts was \$42.31, for 26 pay periods per year, that
13 amounts to \$279.18 for Health insurance, \$7.71 for disability insurance, and \$91.67 for Health
14 savings accounts, for a total of \$378.56 per month.³⁵ That amounts to a total combined payroll
15 deduction for insurance of \$619.23 per month.

16 48. At line 5e of the Debtor's Schedule I, the Debtor did not list the payroll deductions
17 for Life insurance. According to the pay advices provided by the Debtor for her non-filing spouse
18 for the bi-weekly pay period ending dates covering September 01, 2023 through and including
19 April 12, 2024, the Debtor's non-filing spouse's bi-weekly consistent payroll deduction for Life
20 insurance was \$13.31 per month.³⁶

21 49. In addition to the inaccuracies previously noted in Debtor's Means Test, I also
22 noticed a number of potentially unnecessary or discretionary expenses on their Schedule J.

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25 ³³ See Exhibit "9" U.S. Trustee Auditor's Spreadsheet.

26 ³⁴ See Exhibit "9" U.S. Trustee Auditor's Spreadsheet.

27 ³⁵ See Exhibit "9" U.S. Trustee Auditor's Spreadsheet.

28 ³⁶ See Exhibit "9" U.S. Trustee Auditor's Spreadsheet.

50. As more fully detailed herein and summarized in the table below, the following expense, at the amounts listed on Debtor's Amended Schedule "J" should be adjusted under a totality of the circumstances analysis as factually incorrect, unnecessary, excessive, or purely discretionary in nature:

Monthly Expense Level Listed by Debtor on Amended Schedule "J"	Expense Adjustment under § 707(b)(3) Totality of the Circumstances Analysis
\$250.00 Clothing, Laundry and dry cleaning, Line 9	\$207.00 Clothing, Laundry and dry cleaning, Line 9
\$250.00 Personal care products and services, Line 10	\$91.00 Personal care products and services, Line 10
\$400.00 Medical and dental expenses, Line 11	\$206.25 Medical and dental expenses, Line 11
\$1,100.00 Vehicle payments, Line 17	\$0.00 Vehicle payments, Line 17
\$ 2,000.00 Listed Subtotals	\$ 504.25 Reasonable Allowances

51. At Line 9 of the Debtor's Amended Schedule J, the Debtor claimed a monthly expense of \$250.00 for Clothing, laundry and dry cleaning for a household of three (3) persons. Debtor did not provide the U. S. Trustee with any documentation to support the monthly expense in the amount claimed. As a result, the U. S. Trustee adjusted the expense to the IRS National Standard of \$207.00 per month.³⁷ Therefore, even if the Debtor can substantiate the actual amount of this expense, unless Debtor affirmatively proves that the \$250.00 expense is necessary to the health and welfare of the Debtor to maintain this Clothing, laundry and dry cleaning expense at this monthly rate, the monthly expense should be reduced to no more than \$207.00.

52. At Line 10 of the Debtor's Amended Schedule J, the Debtor claimed a monthly expense of \$250.00 for Personal care products and services for a household of three (3) persons.

³⁷ See Exhibit "11" IRS Local standards.

Debtor did not provide the U. S. Trustee with any documentation to support the monthly expense in the amount claimed. As a result, the U. S. Trustee adjusted the expense to the IRS National Standard of \$91.00 per month.³⁸ Therefore, even if the Debtor can substantiate the actual amount of this expense, unless Debtor affirmatively proves that the \$250.00 expense is necessary to the health and welfare of the Debtor to maintain this Personal care products and services expense at this monthly rate, the monthly expense should be reduced to no more than \$91.00.

53. At line 11 of the Debtor's Amended Schedule J, the Debtor claimed a monthly expense of \$400.00 for Medical and dental expenses on top of the Debtor and Debtor's non-filing spouse's payroll deduction for health insurance. In response to the U.S. Trustee's request for proof of the claimed expense³⁹, the Debtor provided the U. S. Trustee with one dental bill in the estimated amount of \$1,650.00 for the period covering September 1, 2023 to April 30, 2024, that's an average expense of \$206.25 per month for the requested eight (8) months.⁴⁰ See paragraph 31 above. As a result, the U. S. Trustee adjusted the expense to the actual proof provided of \$206.25 per month.

54. At line 17 of the Debtor's Amended Schedule J, the Debtor claimed 2 vehicle payments. At the time of filing, the Debtor owned two (2) vehicles: a 2008 Honda Fit, worth \$1,000.00 (Non-filing spouse's property), and a 2004 Chevrolet Colorado, worth \$1,000.00 per the Debtor's Schedule A/B, the Debtor listed no secured Debtor on Schedule D related to the vehicles.⁴¹

55. On June 20, 2024, the Debtor filed amended Schedules I and J, as well as an amended Means Test, after the U. S. Trustee reached out to Counsel regarding the presumption of abuse. The Debtor also filed a Rebuttal of Presumption of abuse in response stating that they

³⁸ See Exhibit "11" IRS Local standards.

³⁹ See Exhibit "2" U.S. Trustee Inquiry Letter.

⁴⁰ See Exhibit "3" and Exhibit "5" Debtor's Responses.

⁴¹ See Case Docket (Petition).

1 were struggling to make minimum payments on their debts and had saved approximately \$10,000
2 for a down payment for a vehicle.⁴² During the Debtor's 341(a) meeting the Debtor testified that
3 the \$9,000.00 in her savings account was savings for a new car because the car they currently
4 have, the 2008 Honda Fit was basically breaking down. The Trustee asked about the source of
5 the savings, per the Debtor it was from her husband's wages.⁴³

6 56. Per the Debtor's Rebuttal of Presumption of abuse filed, the Debtor is in the
7 process of purchasing a new vehicle and plans to replace the other vehicle with a newer, but still
8 used vehicle. The U.S. Trustee reached out to the Debtor to verify the purchase of the vehicles
9 and to request the supporting documents. The Debtor provided 4 documents in response: a Motor
10 Vehicle Order agreement form for a 2024 Tesla Model 3 for a purchase price of \$42,130.00; a
11 Navy Federal Credit Union pre-approved loan in the amount of \$37,000; an estimate for a second
12 vehicle, a 2019 Lexus RX hybrid in the amount of \$30,197.00; and an Insurance Policy listing
13 the 2008 Honda Fit and the 2024 Tesla Model 3. A true and correct copy of said e-mail is attached
14 hereto as **Exhibit "13"** and is incorporated herein as if set forth in full.

15 57. The Debtor planned to replace her current vehicles a 2008 Honda Fit, and a 2004
16 Chevrolet Colorado with a new 2024 Tesla Model 3 (\$42,130.00) and a used 2019 Lexus RX
17 hybrid (\$30,197.00). For a cost comparison, I researched online for used hybrid vehicles. A true
18 and correct copy of said research is attached hereto as **Exhibit "14"** and is incorporated herein as
19 if set forth in full. Unless Debtor affirmatively proves that the new vehicle expense for a brand-
20 new luxury vehicle and a used luxury vehicle are necessary to the health and welfare of the
21 Debtor, the monthly expense should be denied or more affordable options should be pursued. The
22 Debtor's current Schedule E/F debt is a total of \$43,168.00, with the anticipated vehicle purchases
23 (cost plus financing costs) the Debtor will incur close to double the current Schedule E/F debt.

24
25
26
27 ⁴² See Case Docket (Docket #12).

28 ⁴³ See Exhibit "4" 341(a) Transcript of Creditor's meeting.

1 58. Therefore, by simply starting with the Debtor's adjusted monthly income amount
2 of \$12,174.98, reduced by the adjusted payroll deductions in the amount of \$3,165.52, results in
3 a net monthly income of \$9,009.46.

4 59. With respect to Debtor's Schedule J, by reducing the unsubstantiated Clothing,
5 laundry and dry cleaning, the personal care products and services, the Medical and dental
6 expenses, as well as the estimated proposed vehicle expenses, results in an adjusted average
7 monthly expense of \$7,787.00. The Debtor's monthly net income as reflected on Schedule J
8 would increase from negative \$179.11 to \$1,222.46.

9 60. After payment of projected Chapter 13 administrative expenses in the amount of
10 \$122.25 ($\$1,222.46 \times 0.01\%$) results in \$1,100.21 a month to repay Schedule E/F unsecured debt
11 in the amount of \$43,168.00. This amounts to a total repayment of 100% of the disclosed the
12 Schedule F debt of \$43,168.00 in 60 months, the Debtor would be able to repay 100% of the debt
13 in 39 months.

14 61. In the alternative, if one vehicle is purchased at the monthly proposed payment of
15 \$500.00 for a used vehicle, the Debtor's monthly net income as reflected in paragraph 60 above
16 would decrease from \$1,222.46 to \$722.46, and after payment of projected Chapter 13
17 administrative expenses in the amount of \$72.25 ($\$722.46 \times 0.01\%$) results in \$650.21 a month
18 to repay Schedule E/F unsecured debt in the amount of \$43,168.00. The Debtor will be able to
19 repay \$39,012.57 of the Schedule F debt of \$43,168.00 (90.37%) in 60 months,.

20
21 I declare under penalty of perjury that the foregoing facts are true and correct.

22 Executed on *July 2, 2024*, in Los Angeles, California.

23
24 

25 Marlene Fouche
26
27
28

EXHIBIT 1

**U.S. Bankruptcy Court
Central District of California (Los Angeles)
Bankruptcy Petition #: 2:24-bk-13211-DS**

Assigned to: Deborah J. Saltzman
Chapter 7
Voluntary
No asset

Date filed: 04/25/2024
341 meeting: 05/30/2024
Deadline for objecting to discharge: 07/22/2024
Deadline for financial mgmt. course: 07/22/2024

Debtor

Gladys Grace Liad Villacorta
5421 Thornburn St
Los Angeles, CA 90045-2224
LOS ANGELES-CA
SSN / ITIN: xxx-xx-5024

represented by **Benjamin Heston**

Nexus Bankruptcy
3090 Bristol Street #400
Costa Mesa, CA 92626
949-312-1377
Fax : 949-288-2054
Email: bhestonecf@gmail.com

Trustee

Heide Kurtz (TR)
2515 S. Western Avenue #11
San Pedro, CA 90732
(310) 832-3604

U.S. Trustee

United States Trustee (LA)
915 Wilshire Blvd, Suite 1850
Los Angeles, CA 90017
(213) 894-6811

Filing Date	#	Docket Text
04/25/2024	<u>1</u> (71 pgs)	Chapter 7 Voluntary Petition for Individuals . Fee Amount \$338 Filed by Gladys Grace Liad Villacorta (Heston, Benjamin) (Entered: 04/25/2024)
04/25/2024	2	Statement About Your Social Security Number (Official Form 121) Filed by Debtor Gladys Grace Liad Villacorta. (Heston, Benjamin) (Entered: 04/25/2024)
04/25/2024	<u>3</u> (1 pg)	Certificate of Credit Counseling Filed by Debtor Gladys Grace Liad Villacorta. (Heston, Benjamin) (Entered: 04/25/2024)
04/25/2024	<u>4</u> (5 pgs)	Declaration by Debtor as to Whether Debtor(s) Received Income From an Employer Within 60 Days of Petition (LBR Form F1002-1) Filed by Debtor Gladys Grace Liad Villacorta. (Heston, Benjamin) (Entered: 04/25/2024)
04/25/2024		Receipt of Voluntary Petition (Chapter 7)(<u>2:24-bk-13211</u>) [misc,volp7] (338.00) Filing Fee. Receipt number A56782070. Fee amount 338.00. (re: Doc# <u>1</u>) (U.S. Treasury) (Entered: 04/25/2024)

Main Document Page 46 of 246

04/25/2024	<u>5</u> (3 pgs)	Notice of Chapter 7 Bankruptcy Case, Meeting of Creditors & Notice of Appointment of Interim Trustee Kurtz (TR), Heide with 341(a) meeting to be held on 5/21/2024 at 09:00 AM via TR 7, TELEPHONIC MEETING. FOR INSTRUCTIONS CONTACT THE TRUSTEE. for Debtor and Joint Debtor (if joint case) Cert. of Financial Management due by 7/22/2024. Last day to oppose discharge or dischargeability is 7/22/2024. (Scheduled Automatic Assignment, shared account) (Entered: 04/25/2024)
04/27/2024	<u>6</u> (5 pgs)	BNC Certificate of Notice (RE: related document(s) <u>5</u> Meeting of Creditors Chapter 7 (No Asset) (I/J No POC) (309A) (AutoAssign)) No. of Notices: 1. Notice Date 04/27/2024. (Admin.) (Entered: 04/27/2024)
05/22/2024	7	Trustee's Notice of 341(a) Meeting Continued to be held on 5/30/2024 at 08:00 AM at TR 7, TELEPHONIC MEETING. FOR INSTRUCTIONS CONTACT THE TRUSTEE. UST Review (Kurtz (TR), Heide) (Entered: 05/22/2024)
05/30/2024	8	Chapter 7 Trustee's Report of No Distribution: I, Heide Kurtz (TR), having been appointed trustee of the estate of the above-named debtor(s), report that I have neither received any property nor paid any money on account of this estate; that I have made a diligent inquiry into the financial affairs of the debtor(s) and the location of the property belonging to the estate; and that there is no property available for distribution from the estate over and above that exempted by law. Pursuant to Fed R Bank P 5009, I hereby certify that the estate of the above-named debtor(s) has been fully administered. I request that I be discharged from any further duties as trustee. Key information about this case as reported in schedules filed by the debtor(s) or otherwise found in the case record: This case was pending for 1 months. Assets Abandoned (without deducting any secured claims): \$ 0.00, Assets Exempt: \$ 32998.00, Claims Scheduled: \$ 43168.00, Claims Asserted: Not Applicable, Claims scheduled to be discharged without payment (without deducting the value of collateral or debts excepted from discharge): \$ 43168.00. Debtor appeared.. (Kurtz (TR), Heide) (Entered: 05/30/2024)
05/30/2024	9	Trustee Certification of Services Rendered Under 11 U.S.C. Section 330(e). I rendered the following service in the case and am eligible for payment under 11 U.S.C. Section 330(e): Filed a Report of No Distribution. I declare under penalty of perjury that the foregoing is true and correct. (Executed on 5/30/2024). Filed by Trustee Heide Kurtz (TR) (RE: related document(s) 8 Chapter 7 Trustee's Report of No Distribution: I, Heide Kurtz (TR), having been appointed trustee of the estate of the above-named debtor(s), report that I have neither received any property nor paid any money on account of this estate; that I have made a diligent inquiry into the financial affairs of the debtor(s) and the location of the property belonging to the estate; and that there is no property available for distribution from the estate over and above that exempted by law. Pursuant to Fed R Bank P 5009, I hereby certify that the estate of the above-named debtor(s) has been fully administered. I request that I be discharged from any further duties as trustee. Key information about this case as reported in schedules filed by the debtor(s) or otherwise found in the case record: This case was pending for 1 months. Assets Abandoned (without deducting any secured claims): \$ 0.00, Assets Exempt: \$ 32998.00, Claims Scheduled: \$ 43168.00, Claims Asserted: Not Applicable, Claims scheduled to be discharged without payment (without deducting the value of collateral or debts excepted from discharge): \$ 43168.00. Debtor appeared.. (Kurtz (TR), Heide)). (Kurtz (TR), Heide) (Entered: 05/30/2024)
06/06/2024	<u>10</u> (1 pg)	UST Statement of presumed abuse. The United States Trustee has reviewed all materials filed by the Debtor and has determined that the Debtor's case is presumed to be an abuse under Section 707(b). Filed by United States Trustee. (Madoyan, Noreen) (Entered: 06/06/2024)

Main Document Page 47 of 246

06/09/2024	11 (3 pgs)	BNC Certificate of Notice (RE: related document(s) 10 UST Statement of presumed abuse (BNC)) No. of Notices: 1. Notice Date 06/09/2024. (Admin.) (Entered: 06/09/2024)
06/20/2024	12 (3 pgs)	Debtor's Rebuttal of Presumption of Abuse Filed by Debtor Gladys Grace Liad Villacorta. (Heston, Benjamin) WARNING: Correct chapter is chapter 7. Modified on 6/20/2024 (LG). (Entered: 06/20/2024)
06/20/2024	13 (22 pgs)	Amended Schedule I Individual: Your Income (Official Form 106I) , Amended Schedule J: Your Expenses (Official Form 106J) , Summary of Assets and Liabilities for Individual (Official Form 106Sum or 206Sum) , Declaration About an Individual Debtor's Schedules (Official Form 106Dec) , Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) (BNC Option) , Chapter 7 Means Test Calculation (Official Form 122A-2) (BNC Option) Filed by Debtor Gladys Grace Liad Villacorta. (Heston, Benjamin) (Entered: 06/20/2024)

PACER Service Center

Transaction Receipt

07/01/2024 14:00:37

PACER Login:	FoucheMarlene	Client Code:	
Description:	Docket Report	Search Criteria:	2:24-bk-13211-DS Fil or Ent: filed From: 4/2/2024 To: 7/1/2024 Doc From: 0 Doc To: 99999999 Term: included Format: html Page counts for documents: included
Billable Pages:	2	Cost:	0.20

EXHIBIT 2

From: [Fouche, Marlene \(USTP\)](#)
To: [Ben Heston](#)
Cc: [Madoyan, Noreen \(USTP\)](#); [Heide Kurtz \(hkurtz@hkurtzco.com\)](mailto:hkurtz@hkurtzco.com)
Subject: VILLACORTA, GLADYS GRACE LIAD 24-13211-DS Response due 05/20
Date: Wednesday, May 8, 2024 1:34:00 PM

Dear Counsel,

The Office of the United States Trustee has reviewed the underlying Petition, Schedules and Statement of Financial Affairs. Pursuant to 28 U.S.C. § 586(a)(3)(D), the United States Trustee supervises the administration of bankruptcy cases and, when appropriate, takes such action as the United States Trustee deems appropriate to ensure that all schedules, statements, reports and fees required under Title 11 are properly and timely filed. The United States Trustee is also charged with the responsibility to prosecute motions to dismiss pursuant to 11 U.S.C. § 707.

In order to verify the information provided in the petition, schedules and form 22A, please provide an explanation and additional information and documentation to this office **on or before May 20, 2024**.

1. Please provide the United States Trustee with copies of:
 - a. Most recently filed State and Federal Tax Returns;
 - b. W-2, W-2G and 1099 statements for 2023;
 - c. All pay advices or other proof of income (*full and part time*), including rental, commission and residual statements, SAG, AFTRA and WGA quarterly reports, cash disbursement journals and payroll ledgers and EDD, disability, retirement, pension, child support, trust funds, governmental assistance, **for all members of the Debtor's household**, for the entire period, covering **September 1, 2023 through the date of this letter**;
 - d. Current residential loan/lease agreements and monthly statements in which Debtors are a party for the entire monthly periods covering **September 1, 2023** through the date of this letter;
 - e. Current Vehicle Insurance declarations page and monthly statements, covering **September 1, 2023** through the date of this letter, for all vehicles;
 - f. Monthly bills for the entire period covering **September 1, 2023** through the date of this letter. Please include the bills for:
 - i. Childcare and children's education costs (line 8 on Schedule J);
 - ii. Medical and dental expenses (Line 11 on Schedule J);
 - iii. Transportation (Line 12 on Schedule J);
 - iv. Extracurricular activities (Line 21 on Schedule J);
 - v. Phone (Line 6c on Schedule J);
 - g. A recent copy of Debtor's credit report. Debtors can obtain a free credit report by visiting <https://www.annualcreditreport.com/index.action> or by calling toll-

free, 1-877-322-8228.

Your response should also address any special circumstances or issues that are not readily apparent from the Schedules and Statement of Financial Affairs. It is important for the United States Trustee to have a complete understanding of the Debtor's financial picture in order to properly evaluate this case.

Please note this production of documents does not waive your obligation to provide the Chapter 7 trustee with the documents required pursuant to 11 U.S.C. § 521(e)(2).

Please direct your response to this letter to Marlene Fouche, Bankruptcy Auditor, **Via Email only - Reply All**, with a copy to the Chapter 7 Trustee. Responses via zip drives, zip files/folders need to be unlocked/password transmitted. Email submissions are to be no larger than **10mbs**. *Omit complete account numbers, **leaving only the last 4 digits** as disclosed on all documents submitted in response to this letter.*

Be advised that if this office does not receive the requested information **on or before May 20, 2024**, the United States Trustee will file a motion with the court requesting that this case be dismissed. If you have any additional questions regarding this letter, please contact Marlene Fouche at Marlene.Fouche@usdoj.gov.

Thank you, for your cooperation.

*Marlene Fouche, Auditor
Office of the United States Trustee
Region 16 - Los Angeles
915 West Wilshire Blvd
Suite 1850
Los Angeles, CA 90017
(213) 894-6811 / 894-2603 (f)*

EXHIBIT 3

From: [Ben Heston](#)
To: [Fouche, Marlene \(USTP\)](#)
Cc: [Madoyan, Noreen \(USTP\)](#); [Heide Kurtz \(hkurtz@hkurtzco.com\)](#)
Subject: [EXTERNAL] Re: VILLACORTA, GLADYS GRACE LIAD 24-13211-DS Response due 05/20
Date: Wednesday, May 8, 2024 2:27:15 PM
Attachments: [Gladys 2023 W2s.pdf](#)
[Gladys Paystubs.pdf](#)
[Credit Report.PDF](#)
[Calvin Paystubs.pdf](#)

Hi there,

Attached is what I had on hand:

- Paystubs for the Debtor and her spouse
- Debtor's 2023 W2s
- Credit report

I'll have my client get to working on the rest of this once I have an opportunity to touch base with her.

There is a note on Schedule J regarding their car situation, but to expand on that, they are currently using other people's vehicles which are falling apart and have very high expenses associated with that. They are going to be purchasing new vehicles soon, and will almost certainly have to finance the purchases. When I asked the Debtor if she is expecting any changes to her income in the coming year, she mentioned that she's currently in a "probationary period" at her new job and is not certain that she'll continue there. I didn't think that this was worth noting on the petition. I'll check in with my client to see if there's anything else.

On Wed, May 8, 2024 at 1:34 PM Fouche, Marlene (USTP) <Marlene.Fouche@usdoj.gov> wrote:

Dear Counsel,

The Office of the United States Trustee has reviewed the underlying Petition, Schedules and Statement of Financial Affairs. Pursuant to 28 U.S.C. § 586(a)(3)(D), the United States Trustee supervises the administration of bankruptcy cases and, when appropriate, takes such action as the United States Trustee deems appropriate to ensure that all schedules, statements, reports and fees required under Title 11 are properly and timely filed. The United States Trustee is also charged with the responsibility to prosecute motions to dismiss pursuant to 11 U.S.C. § 707.

In order to verify the information provided in the petition, schedules and form 22A, please provide an explanation and additional information and documentation to this office **on or before May 20, 2024.**

1. Please provide the United States Trustee with copies of:

a. Most recently filed State and Federal Tax Returns;

b. W-2, W-2G and 1099 statements for 2023;

c. All pay advices or other proof of income (*full and part time*), including rental, commission and residual statements, SAG, AFTRA and WGA quarterly reports, cash disbursement journals and payroll ledgers and EDD, disability, retirement, pension, child support, trust funds, governmental assistance, **for all members of the Debtor's household**, for the entire period, covering **September 1, 2023 through the date of this letter**;

d. Current residential loan/lease agreements and monthly statements in which Debtors are a party for the entire monthly periods covering **September 1, 2023** through the date of this letter;

e. Current Vehicle Insurance declarations page and monthly statements, covering **September 1, 2023** through the date of this letter, for all vehicles;

f. Monthly bills for the entire period covering **September 1, 2023** through the date of this letter. Please include the bills for:

- i. Childcare and children's education costs (line 8 on Schedule J);
- ii. Medical and dental expenses (Line 11 on Schedule J);
- iii. Transportation (Line 12 on Schedule J);
- iv. Extracurricular activities (Line 21 on Schedule J);
- v. Phone (Line 6c on Schedule J);

g. A recent copy of Debtor's credit report. Debtors can obtain a free credit report by visiting <https://www.annualcreditreport.com/index.action> or by calling toll-free, 1-877-322-8228.

Your response should also address any special circumstances or issues that are not

readily apparent from the Schedules and Statement of Financial Affairs. It is important for the United States Trustee to have a complete understanding of the Debtor's financial picture in order to properly evaluate this case.

Please note this production of documents does not waive your obligation to provide the Chapter 7 trustee with the documents required pursuant to 11 U.S.C. § 521(e)(2).

Please direct your response to this letter to Marlene Fouche, Bankruptcy Auditor, **Via Email only - Reply All**, with a copy to the Chapter 7 Trustee. Responses via zip drives, zip files/folders need to be unlocked/password transmitted. Email submissions are to be no larger than **10mbs**. *Omit complete account numbers, **leaving only the last 4 digits** as disclosed on all documents submitted in response to this letter.*

Be advised that if this office does not receive the requested information **on or before May 20, 2024**, the United States Trustee will file a motion with the court requesting that this case be dismissed. If you have any additional questions regarding this letter, please contact Marlene Fouche at Marlene.Fouche@usdoj.gov.

Thank you, for your cooperation.

Marlene Fouche, Auditor

Office of the United States Trustee

Region 16 - Los Angeles

915 West Wilshire Blvd

Suite 1850

Los Angeles, CA 90017

(213) 894-6811 / 894-2603 (f)

--

Benjamin Heston, Esq.



BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Period Beginning: 03/25/2024
Period Ending: 04/07/2024
Pay Date: 04/12/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
5421 THORNBURN STREET
LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	23,076.96
Gross Pay			\$2,884.62	22,788.50

Other Benefits and Information	this period	total to date
Totl Hrs Worked	80.00	

Deductions	Statutory	
Federal Income Tax	-296.38	2,332.02
Social Security Tax	-171.96	1,364.68
Medicare Tax	-40.22	319.16
CA State Income Tax	-121.90	959.59
CA SDI Tax	-30.51	242.12
Other		
Med 125 Ded	-111.08*	777.56
Net Pay	\$2,112.57	
Chkck1	-2,112.57	
Net Check	\$0.00	

Important Notes

EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information

Taxable Marital Status:

CA: Single

Exemptions/Allowances:

CA: 0

* Excluded from federal taxable wages

Your federal taxable wages this period are
\$2,773.54

Your CA taxable wages this period are
\$2,773.54

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BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Advice number: 00000150039
Pay date: 04/12/2024

Deposited to the account of	account number	transit ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx xxxx	\$2,112.57

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Period Beginning: 03/11/2024
Period Ending: 03/24/2024
Pay Date: 03/29/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
5421 THORNBURN STREET
LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	20,192.34
Gross Pay			\$2,884.62	19,903.88

Other Benefits and Information	this period	total to date
Totl Hrs Worked	80.00	

Deductions	Statutory		
	Federal Income Tax	-296.38	2,035.64
	Social Security Tax	-171.96	1,192.72
	Medicare Tax	-40.21	278.94
	CA State Income Tax	-121.90	837.69
	CA SDI Tax	-30.51	211.61
	Other		
	Med 125 Ded	-111.08*	666.48
	Net Pay	\$2,112.58	
	Chkck1	-2,112.58	
	Net Check	\$0.00	

Important Notes

EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information

Taxable Marital Status:

CA: Single

Exemptions/Allowances:

CA: 0

* Excluded from federal taxable wages

Your federal taxable wages this period are
\$2,773.54

Your CA taxable wages this period are
\$2,773.54

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BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Advice number: 00000130039
Pay date: 03/29/2024

Deposited to the account of	account number	transit ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx xxxx	\$2,112.58

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Period Beginning: 02/26/2024
Period Ending: 03/10/2024
Pay Date: 03/15/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
5421 THORNBURN STREET
LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	17,307.72
Gross Pay			\$2,884.62	17,019.26

Other Benefits and Information	this period	total to date
Totl Hrs Worked	80.00	

Deductions	Statutory	
	Federal Income Tax	-296.38
	Social Security Tax	-171.96
	Medicare Tax	-40.22
	CA State Income Tax	-121.90
	CA SDI Tax	-30.51
	Other	
	Med 125 Ded	-111.08*
	Net Pay	\$2,112.57
	Chkck1	-2,112.57
	Net Check	\$0.00

Important Notes

EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information

Taxable Marital Status:

CA: Single

Exemptions/Allowances:

CA: 0

* Excluded from federal taxable wages

Your federal taxable wages this period are
\$2,773.54

Your CA taxable wages this period are
\$2,773.54

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BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Advice number: 00000114038
Pay date: 03/15/2024

Deposited to the account of	account number	transit ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx xxxx	\$2,112.57

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Period Beginning: 02/12/2024
Period Ending: 02/25/2024
Pay Date: 03/01/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
5421 THORNBURN STREET
LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	14,423.10
Gross Pay			\$2,884.62	14,134.64

Other Benefits and Information	this period	total to date
Totl Hrs Worked	80.00	

Deductions	Statutory	
	Federal Income Tax	-296.38
	Social Security Tax	-171.96
	Medicare Tax	-40.22
	CA State Income Tax	-121.90
	CA SDI Tax	-30.51
	Other	
	Med 125 Ded	-111.08*
	Net Pay	\$2,112.57
	Chkck1	-2,112.57
	Net Check	\$0.00

Important Notes
EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information

Taxable Marital Status:
CA: Single
Exemptions/Allowances:
CA: 0

* Excluded from federal taxable wages

Your federal taxable wages this period are
\$2,773.54
Your CA taxable wages this period are
\$2,773.54

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BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Advice number: 00000090038
Pay date: 03/01/2024

Deposited to the account of	account number	transit	ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx	xxxx	\$2,112.57

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Period Beginning: 01/29/2024
Period Ending: 02/11/2024
Pay Date: 02/16/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
5421 THORNBURN STREET
LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	11,538.48
Gross Pay			\$2,884.62	11,250.02

Other Benefits and Information	this period	total to date
Totl Hrs Worked	80.00	

Deductions	Statutory	
Federal Income Tax	-296.38	1,146.50
Social Security Tax	-171.96	676.84
Medicare Tax	-40.21	158.29
CA State Income Tax	-121.90	471.99
CA SDI Tax	-30.50	120.08
Other		
Med 125 Ded	-111.08*	333.24
Net Pay	\$2,112.59	
Chkck1	-2,112.59	
Net Check	\$0.00	

Important Notes

EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information

Taxable Marital Status:

CA: Single

Exemptions/Allowances:

CA: 0

* Excluded from federal taxable wages

Your federal taxable wages this period are
\$2,773.54

Your CA taxable wages this period are
\$2,773.54

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BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Advice number: 00000070036
Pay date: 02/16/2024

Deposited to the account of	account number	transit ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx xxxx	\$2,112.59

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Period Beginning: 01/15/2024
Period Ending: 01/28/2024
Pay Date: 02/02/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
5421 THORNBURN STREET
LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	8,653.86
Gross Pay			\$2,884.62	8,365.40

Other Benefits and Information	this period	total to date
Totl Hrs Worked	80.00	

Deductions	Statutory		
	Federal Income Tax	-296.38	850.12
	Social Security Tax	-171.96	504.88
	Medicare Tax	-40.22	118.08
	CA State Income Tax	-121.90	350.09
	CA SDI Tax	-30.51	89.58
	Other		
	Med 125 Ded	-111.08*	222.16
	Net Pay	\$2,112.57	
	Chkck1	-2,112.57	
	Net Check	\$0.00	

Important Notes

EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information

Taxable Marital Status:

CA: Single

Exemptions/Allowances:

CA: 0

* Excluded from federal taxable wages

Your federal taxable wages this period are
\$2,773.54

Your CA taxable wages this period are
\$2,773.54

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BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Advice number: 00000050037
Pay date: 02/02/2024

Deposited to the account of	account number	transit ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx xxxx	\$2,112.57

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Period Beginning: 01/01/2024
Period Ending: 01/14/2024
Pay Date: 01/19/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
5421 THORNBURN STREET
LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	5,769.24
Gross Pay			\$2,884.62	5,480.78

Other Benefits and Information	this period	total to date
Totl Hrs Worked	80.00	

Deductions	Statutory		
	Federal Income Tax	-296.38	553.74
	Social Security Tax	-171.96	332.92
	Medicare Tax	-40.22	77.86
	CA State Income Tax	-121.90	228.19
	CA SDI Tax	-30.51	59.07
	Other		
	Med 125 Ded	-111.08*	111.08
	Net Pay	\$2,112.57	
	Chkck1	-2,112.57	
	Net Check	\$0.00	

Important Notes

EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information

Taxable Marital Status:

CA: Single

Exemptions/Allowances:

CA: 0

* Excluded from federal taxable wages

Your federal taxable wages this period are
\$2,773.54

Your CA taxable wages this period are
\$2,773.54

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BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Advice number: 00000030038
Pay date: 01/19/2024

Deposited to the account of	account number	transit	ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx	xxxx	\$2,112.57

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Period Beginning: 12/18/2023
Period Ending: 12/31/2023
Pay Date: 01/05/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
5421 THORNBURN STREET
LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	2,884.62
Unpaid Time		8.00	-288.46	
Gross Pay			\$2,596.16	2,596.16

Other Benefits and Information	this period	total to date
Sic	7.98	
Vac Available	9.24	
Totl Hrs Worked	80.00	

Deductions	Statutory	
Federal Income Tax	-257.36	257.36
Social Security Tax	-160.96	160.96
Medicare Tax	-37.64	37.64
CA State Income Tax	-106.29	106.29
CA SDI Tax	-28.56	28.56
Net Pay	\$2,005.35	
Chkck1	-2,005.35	
Net Check	\$0.00	

Important Notes
EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information
Taxable Marital Status:
CA: Single
Exemptions/Allowances:
CA: 0

Your federal taxable wages this period are
\$2,596.16
Your CA taxable wages this period are
\$2,596.16

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BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Advice number: 00000010037
Pay date: 01/05/2024

Deposited to the account of	account number	transit ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx xxxx	\$2,005.35

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
 2170 S TOWNE CENTRE PL SUITE 300
 ANAHEIM, CA 92806

Period Beginning: 12/04/2023
 Period Ending: 12/17/2023
 Pay Date: 12/22/2023

Filing Status: Single/Married filing separately
 Exemptions/Allowances:
 Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
 5421 THORNBURN STREET
 LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	5,769.24
Unpaid Time		8.00	-288.46	
Gross Pay			\$2,596.16	5,480.78

Other Benefits and Information	this period	total to date
Sic	5.32	
Vac Available	6.16	
Totl Hrs Worked	80.00	

Deductions	Statutory		
Federal Income Tax	-273.48	610.42	
Social Security Tax	-160.96	339.81	
Medicare Tax	-37.64	79.47	
CA State Income Tax	-109.96	247.24	
CA SDI Tax	-23.37	49.33	
Net Pay	\$1,990.75		
Chkck1	-1,990.75		
Net Check	\$0.00		

Important Notes
 EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information
 Taxable Marital Status:
 CA: Single
 Exemptions/Allowances:
 CA: 0

Your federal taxable wages this period are
 \$2,596.16
 Your CA taxable wages this period are
 \$2,596.16

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BAY DESIGN GROUP LLC
 2170 S TOWNE CENTRE PL SUITE 300
 ANAHEIM, CA 92806

Advice number: 00000514037
 Pay date: 12/22/2023

Deposited to the account of	account number	transit	ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx	xxxx	\$1,990.75

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
 2170 S TOWNE CENTRE PL SUITE 300
 ANAHEIM, CA 92806

Period Beginning: 11/20/2023
 Period Ending: 12/03/2023
 Pay Date: 12/08/2023

Filing Status: Single/Married filing separately
 Exemptions/Allowances:
 Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
 5421 THORNBURN STREET
 LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	2,884.62
Gross Pay			\$2,884.62	2,884.62

Other Benefits and Information	this period	total to date
Sic	2.66	
Vac Available	3.08	
Totl Hrs Worked	80.00	

Deductions	Statutory		
Federal Income Tax	-336.94	336.94	
Social Security Tax	-178.85	178.85	
Medicare Tax	-41.83	41.83	
CA State Income Tax	-137.28	137.28	
CA SDI Tax	-25.96	25.96	
Net Pay	\$2,163.76		
Chkck1	-2,163.76		
Net Check	\$0.00		

Important Notes
 EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information
 Taxable Marital Status:
 CA: Single
 Exemptions/Allowances:
 CA: 0

Your federal taxable wages this period are
 \$2,884.62
 Your CA taxable wages this period are
 \$2,884.62

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BAY DESIGN GROUP LLC
 2170 S TOWNE CENTRE PL SUITE 300
 ANAHEIM, CA 92806

Advice number: 00000490038
 Pay date: 12/08/2023

Deposited to the account of	account number	transit ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx xxxx	\$2,163.76

THIS IS NOT A CHECK

NON-NEGOTIABLE

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,563.44	\$500.93	\$188.03	\$2,045.64
YTD	\$22,477.89	\$21,108.61	\$3,742.24	\$1,354.24	\$17,381.41



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement	
Period Start Date	02/25/2024
Period End Date	03/09/2024
Pay Date	03/15/2024
Document	5623838
Net Pay	\$2,095.63

Pay Details

CALVIN ALFILER GARCIA 5421 Thornburn St Los Angeles, CA 90045 USA	Employee Number	261643	Pay Group	US HT SALARY
	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$546.92
HOLIDAY			0.0000	\$0.0000	\$0.00	\$820.38
SALARY	02/26/2024	02/26/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/27/2024	02/27/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/28/2024	02/28/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/29/2024	02/29/2024	8.0000	\$34.1827	\$273.46	
SALARY	03/01/2024	03/01/2024	8.0000	\$34.1827	\$273.46	
SALARY	03/04/2024	03/04/2024	8.0000	\$34.1827	\$273.46	
SALARY	03/05/2024	03/05/2024	8.0000	\$34.1827	\$273.46	
SALARY	03/06/2024	03/06/2024	8.0000	\$34.1827	\$273.46	
SALARY	03/07/2024	03/07/2024	8.0000	\$34.1827	\$273.46	
SALARY	03/08/2024	03/08/2024	8.0000	\$34.1827	\$273.46	\$15,040.30
Total Hours Worked 0.0000			Total Hours 80.0000			

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$42.31	\$253.86	\$0.00	\$0.00
HOME OFC REIMB	No	(\$50.00)	(\$150.00)	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$83.31	\$499.86	\$185.82	\$1,114.92
LTD BUY UP EE	No	\$3.56	\$21.36	—	—
PPO (DEN) PREM	Yes	\$35.26	\$211.56	\$13.67	\$82.02
SUPL LIFE CHILD	No	\$0.92	\$5.52	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$71.10	\$0.00	\$0.00
SUPL LIFE SPOUS	No	\$0.54	\$3.24	\$0.00	\$0.00
VISION PREMIUM	Yes	\$10.28	\$61.68	\$0.01	\$0.06
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.06
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$9.84

Taxes

Tax	Current	YTD
Federal Income Tax	\$173.23	\$813.98
Employee Medicare	\$37.17	\$223.02
Social Security Employee Tax	\$158.93	\$953.60
CA State Income Tax	\$103.41	\$334.26
CA Disability Employee	\$28.20	\$169.19

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	176.9231
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,095.63
Total		\$2,095.63

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,563.44	\$500.94	\$138.03	\$2,095.63
YTD	\$16,407.60	\$15,380.64	\$2,494.05	\$978.18	\$12,935.37



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement	
Period Start Date	02/11/2024
Period End Date	02/24/2024
Pay Date	03/01/2024
Document	5614282
Net Pay	\$2,045.62

Pay Details

CALVIN ALFILER GARCIA 5421 Thornburn St Los Angeles, CA 90045 USA	Employee Number	261643	Pay Group	US HT SALARY
	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$546.92
HOLIDAY			0.0000	\$0.0000	\$0.00	\$820.38
SALARY	02/12/2024	02/12/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/13/2024	02/13/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/14/2024	02/14/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/15/2024	02/15/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/16/2024	02/16/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/19/2024	02/19/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/20/2024	02/20/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/21/2024	02/21/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/22/2024	02/22/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/23/2024	02/23/2024	8.0000	\$34.1827	\$273.46	\$12,305.70
Total Hours Worked 0.0000			Total Hours 80.0000			

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$42.31	\$211.55	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$100.00)	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$83.31	\$416.55	\$185.82	\$929.10
LTD BUY UP EE	No	\$3.56	\$17.80	—	—
PPO (DEN) PREM	Yes	\$35.26	\$176.30	\$13.67	\$68.35
SUPL LIFE CHILD	No	\$0.92	\$4.60	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$59.25	\$0.00	\$0.00
SUPL LIFE SPOUS	No	\$0.54	\$2.70	\$0.00	\$0.00
VISION PREMIUM	Yes	\$10.28	\$51.40	\$0.01	\$0.05
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.05
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$8.20

Taxes

Tax	Current	YTD
Federal Income Tax	\$173.23	\$640.75
Employee Medicare	\$37.17	\$185.85
Social Security Employee Tax	\$158.94	\$794.67
CA State Income Tax	\$103.41	\$230.85
CA Disability Employee	\$28.20	\$140.99

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	172.3077
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,045.62
Total		\$2,045.62

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,563.44	\$500.95	\$188.03	\$2,045.62
YTD	\$13,673.00	\$12,817.20	\$1,993.11	\$840.15	\$10,839.74



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement

Period Start Date 01/28/2024
Period End Date 02/10/2024
Pay Date 02/16/2024
Document 5605189

Net Pay \$2,223.53

Pay Details

CALVIN ALFILER GARCIA 5421 Thornburn St Los Angeles, CA 90045 USA	Employee Number	261643	Pay Group	US HT SALARY
	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$546.92
HOLIDAY			0.0000	\$0.0000	\$0.00	\$820.38
SALARY	01/29/2024	01/29/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/30/2024	01/30/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/31/2024	01/31/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/01/2024	02/01/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/02/2024	02/02/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/05/2024	02/05/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/06/2024	02/06/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/07/2024	02/07/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/08/2024	02/08/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/09/2024	02/09/2024	8.0000	\$34.1827	\$273.46	\$9,571.10
Total Hours Worked 0.0000			Total Hours 80.0000			

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$42.31	\$169.24	\$0.00	\$0.00
HOME OFC REIMB	No	(\$50.00)	(\$100.00)	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$83.31	\$333.24	\$185.82	\$743.28
LTD BUY UP EE	No	\$3.56	\$14.24	—	—
PPO (DEN) PREM	Yes	\$35.26	\$141.04	\$13.67	\$54.68
SUPL LIFE CHILD	No	\$0.92	\$3.68	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$47.40	\$0.00	\$0.00
SUPL LIFE SPOUS	No	\$0.54	\$2.16	\$0.00	\$0.00
VISION PREMIUM	Yes	\$10.28	\$41.12	\$0.01	\$0.04
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.04
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$6.56

Taxes

Tax	Current	YTD
Federal Income Tax	\$116.88	\$467.52
Employee Medicare	\$37.17	\$148.68
Social Security Employee Tax	\$158.93	\$635.73
CA State Income Tax	\$31.86	\$127.44
CA Disability Employee	\$28.20	\$112.79

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	167.6923
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,223.53
Total		\$2,223.53

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,563.44	\$373.04	\$138.03	\$2,223.53
YTD	\$10,938.40	\$10,253.76	\$1,492.16	\$652.12	\$8,794.12



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement

Period Start Date 01/14/2024
Period End Date 01/27/2024
Pay Date 02/02/2024
Document 5594969

Net Pay \$2,173.54

Pay Details

Employee Number	261643	Pay Group	US HT SALARY
SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
		Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$546.92
HOLIDAY	01/15/2024	01/15/2024	8.0000	\$34.1827	\$273.46	\$820.38
SALARY	01/16/2024	01/16/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/17/2024	01/17/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/18/2024	01/18/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/19/2024	01/19/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/22/2024	01/22/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/23/2024	01/23/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/24/2024	01/24/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/25/2024	01/25/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/26/2024	01/26/2024	8.0000	\$34.1827	\$273.46	\$6,836.50
Total Hours Worked 0.0000			Total Hours 80.0000			

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$42.31	\$126.93	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$50.00)	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$83.31	\$249.93	\$185.82	\$557.46
LTD BUY UP EE	No	\$3.56	\$10.68	—	—
PPO (DEN) PREM	Yes	\$35.26	\$105.78	\$13.67	\$41.01
SUPL LIFE CHILD	No	\$0.92	\$2.76	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$35.55	\$0.00	\$0.00
SUPL LIFE SPOUS	No	\$0.54	\$1.62	\$0.00	\$0.00
VISION PREMIUM	Yes	\$10.28	\$30.84	\$0.01	\$0.03
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.03
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$4.92

Taxes

Tax	Current	YTD
Federal Income Tax	\$116.88	\$350.64
Employee Medicare	\$37.17	\$111.51
Social Security Employee Tax	\$158.93	\$476.80
CA State Income Tax	\$31.86	\$95.58
CA Disability Employee	\$28.19	\$84.59

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	163.0769
Personal Time	0.0000	0.0000
Volunteer Plans	8.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,173.54
Total		\$2,173.54

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,563.44	\$373.03	\$188.03	\$2,173.54
YTD	\$8,203.80	\$7,690.32	\$1,119.12	\$514.09	\$6,570.59



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement	
Period Start Date	01/14/2024
Period End Date	01/27/2024
Pay Date	02/02/2024
Document	5594969
Net Pay	\$2,173.54

Pay Details

CALVIN ALFILER GARCIA 5421 Thornburn St Los Angeles, CA 90045 USA	Employee Number	261643	Pay Group	US HT SALARY
	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$546.92
HOLIDAY	01/15/2024	01/15/2024	8.0000	\$34.1827	\$273.46	\$820.38
SALARY	01/16/2024	01/16/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/17/2024	01/17/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/18/2024	01/18/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/19/2024	01/19/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/22/2024	01/22/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/23/2024	01/23/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/24/2024	01/24/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/25/2024	01/25/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/26/2024	01/26/2024	8.0000	\$34.1827	\$273.46	\$6,836.50
Total Hours Worked 0.0000			Total Hours 80.0000			

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$42.31	\$126.93	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$50.00)	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$83.31	\$249.93	\$185.82	\$557.46
LTD BUY UP EE	No	\$3.56	\$10.68	—	—
PPO (DEN) PREM	Yes	\$35.26	\$105.78	\$13.67	\$41.01
SUPL LIFE CHILD	No	\$0.92	\$2.76	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$35.55	\$0.00	\$0.00
SUPL LIFE SPOUS	No	\$0.54	\$1.62	\$0.00	\$0.00
VISION PREMIUM	Yes	\$10.28	\$30.84	\$0.01	\$0.03
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.03
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$4.92

Taxes

Tax	Current	YTD
Federal Income Tax	\$116.88	\$350.64
Employee Medicare	\$37.17	\$111.51
Social Security Employee Tax	\$158.93	\$476.80
CA State Income Tax	\$31.86	\$95.58
CA Disability Employee	\$28.19	\$84.59

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	163.0769
Personal Time	0.0000	0.0000
Volunteer Plans	8.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,173.54
Total		\$2,173.54

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,563.44	\$373.03	\$188.03	\$2,173.54
YTD	\$8,203.80	\$7,690.32	\$1,119.12	\$514.09	\$6,570.59



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement	
Period Start Date	12/31/2023
Period End Date	01/13/2024
Pay Date	01/19/2024
Document	5584148
Net Pay	\$2,223.52

Pay Details

CALVIN ALFILER GARCIA 5421 Thornburn St Los Angeles, CA 90045 USA	Employee Number	261643	Pay Group	US HT SALARY
	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF	01/02/2024	01/02/2024	8.0000	\$34.1827	\$273.46	\$546.92
HOLIDAY	01/01/2024	01/01/2024	8.0000	\$34.1827	\$273.46	\$546.92
SALARY	01/03/2024	01/03/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/04/2024	01/04/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/05/2024	01/05/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/08/2024	01/08/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/09/2024	01/09/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/10/2024	01/10/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/11/2024	01/11/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/12/2024	01/12/2024	8.0000	\$34.1827	\$273.46	\$4,375.36
Total Hours Worked	0.0000	Total Hours	80.0000			

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$42.31	\$84.62	\$0.00	\$0.00
HOME OFC REIMB	No	(\$50.00)	(\$50.00)	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$83.31	\$166.62	\$185.82	\$371.64
LTD BUY UP EE	No	\$3.56	\$7.12	—	—
PPO (DEN) PREM	Yes	\$35.26	\$70.52	\$13.67	\$27.34
SUPL LIFE CHILD	No	\$0.92	\$1.84	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$23.70	\$0.00	\$0.00
SUPL LIFE SPOUS	No	\$0.54	\$1.08	\$0.00	\$0.00
VISION PREMIUM	Yes	\$10.28	\$20.56	\$0.01	\$0.02
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.02
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$3.28

Taxes

Tax	Current	YTD
Federal Income Tax	\$116.88	\$233.76
Employee Medicare	\$37.17	\$74.34
Social Security Employee Tax	\$158.94	\$317.87
CA State Income Tax	\$31.86	\$63.72
CA Disability Employee	\$28.20	\$56.40

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	158.4615
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,223.52
Total		\$2,223.52

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,563.44	\$373.05	\$138.03	\$2,223.52
YTD	\$5,469.20	\$5,126.88	\$746.09	\$326.06	\$4,397.05



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement

Period Start Date 12/03/2023
Period End Date 12/16/2023
Pay Date 12/22/2023
Document 5557113

Net Pay \$2,259.51

Pay Details

CALVIN ALFILER GARCIA	Employee Number	261643	Pay Group	US HT SALARY
5421 Thornburn St	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
Los Angeles, CA 90045	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
USA	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF	12/06/2023	12/06/2023	8.0000	\$34.1827	\$273.46	
FLEX TIME OFF	12/13/2023	12/13/2023	8.0000	\$34.1827	\$273.46	\$1,616.76
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,600.76
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S			0.0000	\$0.0000	\$0.00	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
RETRO PAY			0.0000	\$0.0000	\$0.00	\$80.02
SALARY	12/04/2023	12/04/2023	8.0000	\$34.1827	\$273.46	
SALARY	12/05/2023	12/05/2023	8.0000	\$34.1827	\$273.46	
SALARY	12/07/2023	12/07/2023	8.0000	\$34.1827	\$273.46	
SALARY	12/08/2023	12/08/2023	8.0000	\$34.1827	\$273.46	
SALARY	12/11/2023	12/11/2023	8.0000	\$34.1827	\$273.46	
SALARY	12/12/2023	12/12/2023	8.0000	\$34.1827	\$273.46	
SALARY	12/14/2023	12/14/2023	8.0000	\$34.1827	\$273.46	
SALARY	12/15/2023	12/15/2023	8.0000	\$34.1827	\$273.46	\$65,060.24

Total Hours Worked 0.0000

Total Hours 80.0000

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
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HLTH CARE FSA	Yes	\$38.47	\$1,000.22	\$0.00	\$0.00
HOME OFC REIMB	No	(\$50.00)	(\$600.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$70.06	\$1,821.56	\$156.25	\$4,062.50
LTD BUY UP EE	No	\$3.56	\$90.14	—	—
PPO (DEN) PREM	Yes	\$7.19	\$186.94	\$8.10	\$210.60
PR ACH FUNDING	No	\$0.00	\$73.18	\$0.00	\$0.00
SUPL LIFE CHILD	No	\$0.93	\$24.18	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$282.90	\$0.00	\$0.00
VISION PREMIUM	Yes	\$4.20	\$109.20	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.26
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$41.54

Taxes

Tax	Current	YTD
Federal Income Tax	\$128.76	\$3,678.73
Employee Medicare	\$37.91	\$1,022.30
Social Security Employee Tax	\$162.11	\$4,371.21
CA State Income Tax	\$36.52	\$1,167.41
CA Disability Employee	\$23.53	\$634.53

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	165.2308
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,259.51
Total		\$2,259.51

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,614.68	\$388.83	\$86.26	\$2,259.51
YTD	\$73,621.32	\$67,317.90	\$10,874.18	\$6,173.82	\$56,573.32



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement

Period Start Date 11/19/2023
Period End Date 12/02/2023
Pay Date 12/08/2023
Document 5543344

Net Pay \$2,209.50

Pay Details

CALVIN ALFILER GARCIA	Employee Number	261643	Pay Group	US HT SALARY
5421 Thornburn St	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
Los Angeles, CA 90045	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
USA	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF	11/24/2023	11/24/2023	8.0000	\$34.1827	\$273.46	\$1,069.84
HOLIDAY	11/23/2023	11/23/2023	8.0000	\$34.1827	\$273.46	\$1,600.76
HT CA SPST1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S			0.0000	\$0.0000	\$0.00	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
RETRO PAY			0.0000	\$0.0000	\$0.00	\$80.02
SALARY	11/20/2023	11/20/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/21/2023	11/21/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/22/2023	11/22/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/27/2023	11/27/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/28/2023	11/28/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/29/2023	11/29/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/30/2023	11/30/2023	8.0000	\$34.1827	\$273.46	
SALARY	12/01/2023	12/01/2023	8.0000	\$34.1827	\$273.46	\$62,872.56

Total Hours Worked 0.0000

Total Hours 80.0000

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$38.47	\$961.75	\$0.00	\$0.00

HOME OFC REIMB	No	\$0.00	(\$550.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$70.06	\$1,751.50	\$156.25	\$3,906.25
LTD BUY UP EE	No	\$3.56	\$86.58	—	—
PPO (DEN) PREM	Yes	\$7.19	\$179.75	\$8.10	\$202.50
PR ACH FUNDING	No	\$0.00	\$73.18	\$0.00	\$0.00
SUPL LIFE CHILD	No	\$0.93	\$23.25	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$271.05	\$0.00	\$0.00
VISION PREMIUM	Yes	\$4.20	\$105.00	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.25
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$39.90

Taxes

Tax	Current	YTD
Federal Income Tax	\$128.76	\$3,549.97
Employee Medicare	\$37.92	\$984.39
Social Security Employee Tax	\$162.11	\$4,209.10
CA State Income Tax	\$36.52	\$1,130.89
CA Disability Employee	\$23.53	\$611.00

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	176.6154
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,209.50
Total		\$2,209.50

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,614.68	\$388.84	\$136.26	\$2,209.50
YTD	\$70,886.72	\$64,703.22	\$10,485.35	\$6,087.56	\$54,313.81



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement

Period Start Date 11/05/2023
Period End Date 11/18/2023
Pay Date 11/24/2023
Document 5530862

Net Pay \$2,259.50

Pay Details

CALVIN ALFILER GARCIA	Employee Number	261643	Pay Group	US HT SALARY
5421 Thornburn St	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
Los Angeles, CA 90045	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
USA	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,327.30
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S			0.0000	\$0.0000	\$0.00	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
RETRO PAY			0.0000	\$0.0000	\$0.00	\$80.02
SALARY	11/06/2023	11/06/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/07/2023	11/07/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/08/2023	11/08/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/09/2023	11/09/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/10/2023	11/10/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/13/2023	11/13/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/14/2023	11/14/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/15/2023	11/15/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/16/2023	11/16/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/17/2023	11/17/2023	8.0000	\$34.1827	\$273.46	\$60,684.88

Total Hours Worked 0.0000

Total Hours 80.0000

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$38.47	\$923.28	\$0.00	\$0.00
HOME OFC REIMB	No	(\$50.00)	(\$550.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$70.06	\$1,681.44	\$156.25	\$3,750.00
LTD BUY UP EE	No	\$3.56	\$83.02	—	—
PPO (DEN) PREM	Yes	\$7.19	\$172.56	\$8.10	\$194.40
PR ACH FUNDING	No	\$0.00	\$73.18	\$0.00	\$0.00
SUPL LIFE CHILD	No	\$0.93	\$22.32	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$259.20	\$0.00	\$0.00
VISION PREMIUM	Yes	\$4.20	\$100.80	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.24
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$38.26

Taxes

Tax	Current	YTD
Federal Income Tax	\$128.76	\$3,421.21
Employee Medicare	\$37.91	\$946.47
Social Security Employee Tax	\$162.11	\$4,046.99
CA State Income Tax	\$36.52	\$1,094.37
CA Disability Employee	\$23.54	\$587.47

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	0.0000	180.0000
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,259.50
Total		\$2,259.50

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,614.68	\$388.84	\$86.26	\$2,259.50
YTD	\$68,152.12	\$62,088.54	\$10,096.51	\$5,951.30	\$52,104.31



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement

Period Start Date 11/13/2023
Period End Date 11/17/2023
Pay Date 11/14/2023
Document 6027003

Net Pay \$0.00

Pay Details

CALVIN ALFILER GARCIA	Employee Number	261643	Pay Group	US HT SALARY
5421 Thornburn St	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
Los Angeles, CA 90045	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
USA	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,327.30
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S			0.0000	\$0.0000	\$0.00	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
RETRO PAY	11/14/2023	11/14/2023			\$80.02	\$80.02
SALARY			0.0000	\$0.0000	\$0.00	\$57,950.28

Total Hours Worked 0.0000

Total Hours 0.0000

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
HLTH CARE FSA	Yes	\$0.00	\$884.81	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$500.00)	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$0.00	\$1,611.38	\$0.00	\$3,593.75
LTD BUY UP EE	No	\$0.00	\$79.46	—	—
PPO (DEN) PREM	Yes	\$0.00	\$165.37	\$0.00	\$186.30
PR ACH FUNDING	No	\$73.18	\$73.18	\$0.00	\$0.00
SUPL LIFE CHILD	No	\$0.00	\$21.39	\$0.00	\$0.00

SUPL LIFE EE	No	\$0.00	\$247.35	\$0.00	\$0.00
VISION PREMIUM	Yes	\$0.00	\$96.60	\$0.00	\$0.00
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
EAP ER	No	\$0.00	\$0.00	\$0.00	\$0.23
LTD CORE ER	No	\$0.00	\$0.00	\$0.00	\$36.62

Taxes

Tax	Current	YTD
Federal Income Tax	\$0.00	\$3,292.45
Employee Medicare	\$1.16	\$908.56
Social Security Employee Tax	\$4.96	\$3,884.88
CA State Income Tax	\$0.00	\$1,057.85
CA Disability Employee	\$0.72	\$563.93

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	0.0000	180.0000
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
No records found		

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$80.02	\$80.02	\$6.84	\$73.18	\$0.00
YTD	\$65,417.52	\$59,473.86	\$9,707.67	\$5,865.04	\$49,844.81



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement

Period Start Date 10/22/2023
Period End Date 11/04/2023
Pay Date 11/09/2023
Document 5519444

Net Pay \$2,209.51

Pay Details

CALVIN ALFILER GARCIA	Employee Number	261643	Pay Group	US HT SALARY
5421 Thornburn St	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
Los Angeles, CA 90045	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
USA	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,327.30
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S			0.0000	\$0.0000	\$0.00	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
SALARY	10/23/2023	10/23/2023	8.0000	\$34.1827	\$273.46	
SALARY	10/24/2023	10/24/2023	8.0000	\$34.1827	\$273.46	
SALARY	10/25/2023	10/25/2023	8.0000	\$34.1827	\$273.46	
SALARY	10/26/2023	10/26/2023	8.0000	\$34.1827	\$273.46	
SALARY	10/27/2023	10/27/2023	8.0000	\$34.1827	\$273.46	
SALARY	10/30/2023	10/30/2023	8.0000	\$34.1827	\$273.46	
SALARY	10/31/2023	10/31/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/01/2023	11/01/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/02/2023	11/02/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/03/2023	11/03/2023	8.0000	\$34.1827	\$273.46	\$57,950.28

Total Hours Worked 0.0000

Total Hours 80.0000

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
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HLTH CARE FSA	Yes	\$38.47	\$884.81	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$500.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$70.06	\$1,611.38	\$156.25	\$3,593.75
LTD BUY UP EE	No	\$3.56	\$79.46	—	—
PPO (DEN) PREM	Yes	\$7.19	\$165.37	\$8.10	\$186.30
SUPL LIFE CHILD	No	\$0.93	\$21.39	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$247.35	\$0.00	\$0.00
VISION PREMIUM	Yes	\$4.20	\$96.60	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.23
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$36.62

Taxes

Tax	Current	YTD
Federal Income Tax	\$128.76	\$3,292.45
Employee Medicare	\$37.91	\$907.40
Social Security Employee Tax	\$162.11	\$3,879.92
CA State Income Tax	\$36.52	\$1,057.85
CA Disability Employee	\$23.53	\$563.21

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	0.0000	180.0000
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,209.51
Total		\$2,209.51

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,614.68	\$388.83	\$136.26	\$2,209.51
YTD	\$65,337.50	\$59,393.84	\$9,700.83	\$5,791.86	\$49,844.81



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement

Period Start Date 10/08/2023
Period End Date 10/21/2023
Pay Date 10/27/2023
Document 5509045

Net Pay \$2,199.57

Pay Details

CALVIN ALFILER GARCIA	Employee Number	261643	Pay Group	US HT SALARY
5421 Thornburn St	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
Los Angeles, CA 90045	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
USA	Pay Rate	\$33.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,327.30
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S			0.0000	\$0.0000	\$0.00	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
SALARY	10/09/2023	10/09/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/10/2023	10/10/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/11/2023	10/11/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/12/2023	10/12/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/13/2023	10/13/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/16/2023	10/16/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/17/2023	10/17/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/18/2023	10/18/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/19/2023	10/19/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/20/2023	10/20/2023	8.0000	\$33.1827	\$265.46	\$55,215.68

Total Hours Worked 0.0000

Total Hours 80.0000

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
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HLTH CARE FSA	Yes	\$38.47	\$846.34	\$0.00	\$0.00
HOME OFC REIMB	No	(\$50.00)	(\$500.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$70.06	\$1,541.32	\$156.25	\$3,437.50
LTD BUY UP EE	No	\$3.45	\$75.90	—	—
PPO (DEN) PREM	Yes	\$7.19	\$158.18	\$8.10	\$178.20
SUPL LIFE CHILD	No	\$0.93	\$20.46	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$235.50	\$0.00	\$0.00
VISION PREMIUM	Yes	\$4.20	\$92.40	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.22
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$1.59	\$34.98

Taxes

Tax	Current	YTD
Federal Income Tax	\$119.16	\$3,163.69
Employee Medicare	\$36.76	\$869.49
Social Security Employee Tax	\$157.15	\$3,717.81
CA State Income Tax	\$33.00	\$1,021.33
CA Disability Employee	\$22.81	\$539.68

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.0000	180.0000
Personal Time	0.0000	0.0000
Volunteer Plans	8.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,199.57
Total		\$2,199.57

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,654.60	\$2,534.68	\$368.88	\$86.15	\$2,199.57
YTD	\$62,602.90	\$56,779.16	\$9,312.00	\$5,655.60	\$47,635.30



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Details

CALVIN ALFILER GARCIA
5421 Thornburn St
Los Angeles, CA 90045
USA

Employee Number	261643
SSN	XXX-XX-XXXX
Job	GRAPHIC DESIGNER
Pay Rate	\$33.1827
Pay Frequency	Biweekly

Pay Group	US HT SALARY
Location	CA - HT HEADQUARTERS
GL Company	HTUS - HOT TOPIC USA
Region	HQMER - HQ MERCHANDISING
Area	MERCH - MERCHANDISING
Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,327.30
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S			0.0000	\$0.0000	\$0.00	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
SALARY	09/25/2023	09/25/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/26/2023	09/26/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/27/2023	09/27/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/28/2023	09/28/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/29/2023	09/29/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/02/2023	10/02/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/03/2023	10/03/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/04/2023	10/04/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/05/2023	10/05/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/06/2023	10/06/2023	8.0000	\$33.1827	\$265.46	\$52,561.08

Total Hours Worked 0.0000

Total Hours 80.0000

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$38.47	\$807.87	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$450.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$70.06	\$1,471.26	\$156.25	\$3,281.25
LTD BUY UP EE	No	\$3.45	\$72.45	—	—
PPO (DEN) PREM	Yes	\$7.19	\$150.99	\$8.10	\$170.10
SUPL LIFE CHILD	No	\$0.93	\$19.53	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$223.65	\$0.00	\$0.00
VISION PREMIUM	Yes	\$4.20	\$88.20	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.21
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$1.59	\$33.39

Taxes

Tax	Current	YTD
Federal Income Tax	\$119.16	\$3,044.53
Employee Medicare	\$36.75	\$832.73
Social Security Employee Tax	\$157.15	\$3,560.66
CA State Income Tax	\$33.00	\$988.33
CA Disability Employee	\$22.81	\$516.87

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	176.0000
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,149.58
Total		\$2,149.58

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,654.60	\$2,534.68	\$368.87	\$136.15	\$2,149.58
YTD	\$59,948.30	\$54,244.48	\$8,943.12	\$5,569.45	\$45,435.73



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Details

CALVIN ALFILER GARCIA
5421 Thornburn St
Los Angeles, CA 90045
USA

Employee Number 261643
SSN XXX-XX-XXXX
Job GRAPHIC DESIGNER
Pay Rate \$33.1827
Pay Frequency Biweekly

Pay Group US HT SALARY
Location CA - HT HEADQUARTERS
GL Company HTUS - HOT TOPIC USA
Region HQMER - HQ MERCHANDISING
Area MERCH - MERCHANDISING
Department 7480 - BUYING SOURCING

Pay Statement	
Period Start Date	09/10/2023
Period End Date	09/23/2023
Pay Date	09/29/2023
Document	5483654
Net Pay	\$2,149.58

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,327.30
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S			0.0000	\$0.0000	\$0.00	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
SALARY	09/11/2023	09/11/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/12/2023	09/12/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/13/2023	09/13/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/14/2023	09/14/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/15/2023	09/15/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/18/2023	09/18/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/19/2023	09/19/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/20/2023	09/20/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/21/2023	09/21/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/22/2023	09/22/2023	8.0000	\$33.1827	\$265.46	\$49,906.48
Total Hours Worked 0.0000 Total Hours 80.0000						

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$38.47	\$769.40	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$450.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$70.06	\$1,401.20	\$156.25	\$3,125.00
LTD BUY UP EE	No	\$3.45	\$69.00	—	—
PPO (DEN) PREM	Yes	\$7.19	\$143.80	\$8.10	\$162.00
SUPL LIFE CHILD	No	\$0.93	\$18.60	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$211.80	\$0.00	\$0.00
VISION PREMIUM	Yes	\$4.20	\$84.00	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.20
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$1.59	\$31.80

Taxes

Tax	Current	YTD
Federal Income Tax	\$119.16	\$2,925.37
Employee Medicare	\$36.75	\$795.98
Social Security Employee Tax	\$157.15	\$3,403.51
CA State Income Tax	\$33.00	\$955.33
CA Disability Employee	\$22.81	\$494.06

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	171.3846
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,149.58
Total		\$2,149.58

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,654.60	\$2,534.68	\$368.87	\$136.15	\$2,149.58
YTD	\$57,293.70	\$51,709.80	\$8,574.25	\$5,433.30	\$43,286.15

Pay Details				
CALVIN ALFILER GARCIA 5421 Thornburn St Los Angeles, CA 90045 USA	Employee Number	261643	Pay Group	US HT SALARY
	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
	Pay Rate	\$33.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings						
Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,327.30
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S	07/29/2023	07/29/2023			\$845.49	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
SALARY			0.0000	\$0.0000	\$0.00	\$47,251.88
Total Hours Worked 0.0000 Total Hours 0.0000						

Deductions					
Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$0.00	\$730.93	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$450.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$0.00	\$1,331.14	\$0.00	\$2,968.75
LTD BUY UP EE	No	\$0.00	\$65.55	—	—
PPO (DEN) PREM	Yes	\$0.00	\$136.61	\$0.00	\$153.90
SUPL LIFE CHILD	No	\$0.00	\$17.67	\$0.00	\$0.00
SUPL LIFE EE	No	\$0.00	\$199.95	\$0.00	\$0.00
VISION PREMIUM	Yes	\$0.00	\$79.80	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.00	\$0.19
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$0.00	\$30.21

Taxes		
Tax	Current	YTD
Federal Income Tax	\$186.01	\$2,806.21
Employee Medicare	\$12.26	\$759.23
Social Security Employee Tax	\$52.42	\$3,246.36
CA State Income Tax	\$86.49	\$922.33
CA Disability Employee	\$7.61	\$471.25

Paid Time Off			Net Pay Distribution		
Plan	Current	Balance	Account Number	Account Type	Amount
HT CA Covid Pos	0.0000	0.0000	xxxxxx3359	Checking	\$500.70
HT CA Covid VAC	0.0000	0.0000	Total		\$500.70
Paid Time Off	0.0000	166.7693			
Personal Time	0.0000	0.0000			
Volunteer Plans	0.0000	8.0000			

Pay Summary				
	Gross	FIT Taxable Wages	Taxes	Net Pay
Current	\$845.49	\$845.49	\$344.79	\$500.70
YTD	\$54,639.10	\$49,175.12	\$8,205.38	\$41,136.57



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement

Period Start Date 08/27/2023
Period End Date 09/09/2023
Pay Date 09/20/2023
Document 5473195

Net Pay \$500.70

Pay Details

CALVIN ALFILER GARCIA	Employee Number 261643	Pay Group US HT SALARY
5421 Thornburn St	SSN XXX-XX-XXXX	Location CA - HT HEADQUARTERS
Los Angeles, CA 90045	Job GRAPHIC DESIGNER	GL Company HTUS - HOT TOPIC USA
USA	Pay Rate \$33.1827	Region HQMER - HQ MERCHANDISING
	Pay Frequency Biweekly	Area MERCH - MERCHANDISING
		Department 7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,327.30
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S	07/29/2023	07/29/2023			\$845.49	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
SALARY			0.0000	\$0.0000	\$0.00	\$47,251.88
Total Hours Worked 0.0000 Total Hours 0.0000						

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$0.00	\$730.93	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$450.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$0.00	\$1,331.14	\$0.00	\$2,968.75
LTD BUY UP EE	No	\$0.00	\$65.55	—	—
PPO (DEN) PREM	Yes	\$0.00	\$136.61	\$0.00	\$153.90
SUPL LIFE CHILD	No	\$0.00	\$17.67	\$0.00	\$0.00
SUPL LIFE EE	No	\$0.00	\$199.95	\$0.00	\$0.00
VISION PREMIUM	Yes	\$0.00	\$79.80	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.00	\$0.19
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$0.00	\$30.21

Taxes

Tax	Current	YTD
Federal Income Tax	\$186.01	\$2,806.21
Employee Medicare	\$12.26	\$759.23
Social Security Employee Tax	\$52.42	\$3,246.36
CA State Income Tax	\$86.49	\$922.33
CA Disability Employee	\$7.61	\$471.25

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	0.0000	166.7693
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$500.70
Total		\$500.70

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$845.49	\$845.49	\$344.79	\$0.00	\$500.70
YTD	\$54,639.10	\$49,175.12	\$8,205.38	\$5,297.15	\$41,136.57



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement	
Period Start Date	08/27/2023
Period End Date	09/09/2023
Pay Date	09/15/2023
Document	5463896
Net Pay	\$2,199.57

Pay Details

CALVIN ALFILER GARCIA
5421 Thornburn St
Los Angeles, CA 90045
USA

Employee Number 261643
SSN XXX-XX-XXXX
Job GRAPHIC DESIGNER
Pay Rate \$33.1827
Pay Frequency Biweekly

Pay Group US HT SALARY
Location CA - HT HEADQUARTERS
GL Company HTUS - HOT TOPIC USA
Region HQMER - HQ MERCHANDISING
Area MERCH - MERCHANDISING
Department 7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY	09/04/2023	09/04/2023	8.0000	\$33.1827	\$265.46	\$1,327.30
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
SALARY	08/28/2023	08/28/2023	8.0000	\$33.1827	\$265.46	
SALARY	08/29/2023	08/29/2023	8.0000	\$33.1827	\$265.46	
SALARY	08/30/2023	08/30/2023	8.0000	\$33.1827	\$265.46	
SALARY	08/31/2023	08/31/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/01/2023	09/01/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/05/2023	09/05/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/06/2023	09/06/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/07/2023	09/07/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/08/2023	09/08/2023	8.0000	\$33.1827	\$265.46	\$47,251.88
Total Hours Worked 0.0000 Total Hours 80.0000						

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$38.47	\$730.93	\$0.00	\$0.00
HOME OFC REIMB	No	(\$50.00)	(\$450.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$70.06	\$1,331.14	\$156.25	\$2,968.75
LTD BUY UP EE	No	\$3.45	\$65.55	—	—
PPO (DEN) PREM	Yes	\$7.19	\$136.61	\$8.10	\$153.90
SUPL LIFE CHILD	No	\$0.93	\$17.67	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$199.95	\$0.00	\$0.00
VISION PREMIUM	Yes	\$4.20	\$79.80	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.19
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$1.59	\$30.21

Taxes

Tax	Current	YTD
Federal Income Tax	\$119.16	\$2,620.20
Employee Medicare	\$36.75	\$746.97
Social Security Employee Tax	\$157.15	\$3,193.94
CA State Income Tax	\$33.00	\$835.84
CA Disability Employee	\$22.82	\$463.64

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	166.7693
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,199.57
Total		\$2,199.57

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,654.60	\$2,534.68	\$368.88	\$86.15	\$2,199.57
YTD	\$53,793.61	\$48,329.63	\$7,860.59	\$5,297.15	\$40,635.87

EXHIBIT 4

PETER C. ANDERSON
MS. FOUCHE
MICHAEL JONES, State Bar No. 271574
ASSISTANT UNITED STATES TRUSTEE
Noreen Madoyan, State Bar No. 279227
TRIAL ATTORNEY
OFFICE OF THE UNITED STATES TRUSTEE
915 Wilshire Boulevard, Suite 1850
Los Angeles, California 90017-3560
(213) 894-4064 telephone
(213) 894-2603 facsimile
Email: Noreen.Madoyan@usdoj.gov

UNITED STATES BANKRUPTCY COURT
CENTRAL DISTRICT OF CALIFORNIA - Los Angeles Division

In re:	)	Case No.: 2:24-bk-13211-DS
GLADYS GRACE LIAD VILLACORTA	)	Chapter 7
Debtors.	)	TRANSCRIPT OF 341(a) MEETING OF CREDITORS
	)	Meeting Date: May 21, 2024
	)	Place: Zoom (Track 2815)

APPEARANCES

Heide Kurtz, Trustee
2515 S. Western Avenue #11
San Pedro, CA 90732
310 832-3604
trustee@hkurtzco.com

Benjamin Heston, Attorney for the Debtor
Nexus Bankruptcy
3090 Bristol Street #400
Costa Mesa, CA 92626
949-312-1377
bhestonecf@gmail.com

Gladys Grace Liad Villacorta, Debtor
5421 Thornburn Street
Los Angeles, CA 90045-2224

Marlene Fouche, Auditor
Office of the United States Trustee
915 Wilshire Blvd., Suite 1850
Los Angeles, CA 90017
213 894-6811
marlene.fouche@usdoj.gov

1 TRUSTEE Next up, case #7 Gladys Grace Liad Villacorta 13211. I have a match on the
2 Social Security card and ID.
3 MR. HESTON Thank you. Good morning. This is Ben Heston on behalf of the debtor.
4 TRUSTEE Thank you. Is Miss Liad Villacorta?
5 DEBTOR I just like got online.
6 TRUSTEE OK, raise your right hand. Do you solemnly swear to tell the truth and
7 nothing but the truth, so help you God?
8 DEBTOR I do.
9 TRUSTEE Have you read the informational brochure?
10 DEBTOR I have.
11 TRUSTEE Did you read and review the bankruptcy schedules and paperwork before you
12 signed them?
13 DEBTOR Yes, I did.
14 TRUSTEE Is all the information true, complete, and correct?
15 DEBTOR Yes.
16 TRUSTEE Have you listed all your assets and all your creditors?
17 DEBTOR Yes.
18 TRUSTEE Were there any changes or corrections needed?
19 DEBTOR No changes.
20 TRUSTEE Does your spouse have any assets like a separate house or business?
21 DEBTOR No, he doesn't.
22 TRUSTEE OK. Have you filed bankruptcy before?
23 DEBTOR I haven't.
24 TRUSTEE Do you pay child or spousal support?
25 DEBTOR No.
26 TRUSTEE And is your address and employer's address correct?
27 DEBTOR Yes it is.
28 TRUSTEE And you, you're not self-employed.

1 DEBTOR No, I'm not.

2 TRUSTEE As a designer, do you have any copyrights or intellectual property?

3 DEBTOR No, I don't.

4 TRUSTEE OK, you also show in your savings account \$9,000. Where did that money
5 come from?

6 DEBTOR We've been saving for a new car because the car we have right now, it's 2008
7 and it's basically breaking down.

8 TRUSTEE So, you've been saving from your wages? Is that correct?

9 DEBTOR My husband's wages.

10 TRUSTEE OK. Are you suing anyone or planning to sue anyone?

11 DEBTOR No.

12 TRUSTEE Does anybody owe you any money?

13 DEBTOR No.

14 TRUSTEE Creditors present?

15 MS. FOUCHE Yes, good morning. This is. Marlene Fouche from the Office of the United
16 States Trustee. I just have a couple of questions.

17 TRUSTEE Certainly.

18 MS. FOUCHE Miss Villacorta are you currently -- you mentioned in your e-mail
19 conversations that you're on probation. Are you still looking for the same
20 employer? I'm sorry.

21 DEBTOR I'm sorry. Can you say that again?

22 MS. FOUCHE In our conversation or e-mail from counsel, there was a mention about you
23 being on probation at the moment you just started the job in December. Are
24 you planning to continue working at that employer?

25 DEBTOR Yes. (illegible) So far, yes.

26 MS. FOUCHE Yes. OK. And you mentioned earlier that you own a 2008 vehicle, is that
27 correct?

28 DEBTOR Yes. It's under my husband's name.

1 MS. FOUCHE OK. Do you borrow a vehicle from anybody else?
2 DEBTOR We had borrowed from his dad to take our sons back and forth to school
3 while I go to work.
4 MS. FOUCHE You mentioned your Dad's car, but you are no longer borrowing it?
5 DEBTOR I'm sorry. What was that?
6 MS. FOUCHE Are you still Borrowing it? Or are you no longer borrowing it?
7 DEBTOR Yes, we still have it.
8 MS. FOUCHE Do you play anything for that vehicle to use it?
9 DEBTOR No. No.
10 MS. FOUCHE OK. I believe we are still waiting for some documentation counsel, so Miss
11 Trustee if I can get a continuation, I'd appreciate it.
12 TRUSTEE OK. I'm going to continue this case to May 30th at 8:00 AM.
13 MS. FOUCHE Thank you.
14 TRUSTEE OK.
15 MR. HESTON And I'm sorry, I missed the name from the US Trustee's Office.
16 MS. FOUCHE Marlene Fouche.
17 MR. HESTON OK, that's it.
18 TRUSTEE So, we're going to continue this to May 30th at 8:00 for US Trustee review.
19 And if counsel, you can check with the US Trustee after you provide all the
20 documents and she'll let you know if you need to come back or not. I'm done
21 with my questioning. OK?
22 MR. HESTON Alright, thank you very much.
23 TRUSTEE Any other creditors present? OK, that'll be all. Thank you.
24
25
26
27
28

CERTIFICATION

I, PATTI ANN BRUNDIGE, certify that:

I am employed by the Office of the United States Trustee. I am over the age of 18.

The foregoing is a true and correct transcript made by me from the electronic sound recording of the Section 341(a) Meeting of Creditors held in the above-captioned matter on May 21, 2024, commencing at or about 9:00 a.m.

The questions propounded, and all objections and statements made at the time of the examination, were recorded by means of an electronic sound recording maintained by the United States Bankruptcy Court for the Central District of California.

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct, and that this declaration was executed on June 27, 2024 at Los Angeles, California.

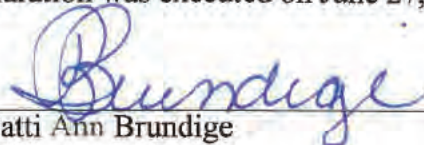

Patti Ann Brundige

EXHIBIT 5

From: [Ben Heston](#)
To: [Fouche, Marlene \(USTP\)](#)
Cc: [Madoyan, Noreen \(USTP\)](#); [Heide Kurtz \(hkurtz@hkurtzco.com\)](#)
Subject: [EXTERNAL] Re: VILLACORTA, GLADYS GRACE LIAD 24-13211-DS Response due 05/20
Date: Tuesday, May 28, 2024 3:47:56 PM
Attachments: [Lease Payments.pdf](#)
[Extracurricular Activities.pdf](#)
[Proof of Auto Insurance.pdf](#)
[Car Repairs.pdf](#)
[Residential Lease.pdf](#)
[2023 Tax Return \(Calvin\).pdf](#)
[2023 Tax Return \(Gladys\).pdf](#)
[Cell Phone Statements.pdf](#)
[Dental Expenses.pdf](#)

See attached.

On Tue, May 28, 2024 at 3:27 PM Ben Heston <ben@nexusbk.com> wrote:

Hi there,

Sorry I haven't gotten back to you sooner. I've been bogged down with a couple Chapter 13s and my first Chapter 11 case. Anyways, my client provided me with a few additional documents which I will send in just a little bit once I have a chance to organize them. One of the things that she provided me was her husband's tax return which listed some additional income that she was previously not aware of. Given how close she was on the Means Test already, this will likely put her over. I will get back to you on this ASAP.

On Wed, May 8, 2024 at 2:25 PM Ben Heston <ben@nexusbk.com> wrote:

Hi there,

Attached is what I had on hand:

- Paystubs for the Debtor and her spouse
- Debtor's 2023 W2s
- Credit report

I'll have my client get to working on the rest of this once I have an opportunity to touch base with her.

There is a note on Schedule J regarding their car situation, but to expand on that, they are currently using other people's vehicles which are falling apart and have very high expenses associated with that. They are going to be purchasing new vehicles soon, and will almost certainly have to finance the purchases. When I asked the Debtor if she is expecting any changes to her income in the coming year, she mentioned that she's currently in a "probationary period" at her new job and is not certain that she'll continue there. I didn't think that this was worth noting on the petition. I'll check in with my client to see if there's anything else.

On Wed, May 8, 2024 at 1:34 PM Fouche, Marlene (USTP)

<Marlene.Fouche@usdoj.gov> wrote:

Dear Counsel,

The Office of the United States Trustee has reviewed the underlying Petition, Schedules and Statement of Financial Affairs. Pursuant to 28 U.S.C. § 586(a)(3)(D), the United States Trustee supervises the administration of bankruptcy cases and, when appropriate, takes such action as the United States Trustee deems appropriate to ensure that all schedules, statements, reports and fees required under Title 11 are properly and timely filed. The United States Trustee is also charged with the responsibility to prosecute motions to dismiss pursuant to 11 U.S.C. § 707.

In order to verify the information provided in the petition, schedules and form 22A, please provide an explanation and additional information and documentation to this office **on or before May 20, 2024**.

1. Please provide the United States Trustee with copies of:
 - a. Most recently filed State and Federal Tax Returns;
 - b. W-2, W-2G and 1099 statements for 2023;
 - c. All pay advices or other proof of income (*full and part time*), including rental, commission and residual statements, SAG, AFTRA and WGA quarterly reports, cash disbursement journals and payroll ledgers and EDD, disability, retirement, pension, child support, trust funds, governmental assistance, **for all members of the Debtor's household**, for the entire period, covering **September 1, 2023 through the date of this letter**;
 - d. Current residential loan/lease agreements and monthly statements in which Debtors are a party for the entire monthly periods covering **September 1, 2023** through the date of this letter;
 - e. Current Vehicle Insurance declarations page and monthly statements, covering **September 1, 2023** through the date of this letter, for all vehicles;
 - f. Monthly bills for the entire period covering **September 1, 2023** through the date of this letter. Please include the bills for:

- i. Childcare and children's education costs (line 8 on Schedule J);
- ii. Medical and dental expenses (Line 11 on Schedule J);
- iii. Transportation (Line 12 on Schedule J);
- iv. Extracurricular activities (Line 21 on Schedule J);
- v. Phone (Line 6c on Schedule J);
- g. A recent copy of Debtor's credit report. Debtors can obtain a free credit report by visiting <https://www.annualcreditreport.com/index.action> or by calling toll-free, 1-877-322-8228.

Your response should also address any special circumstances or issues that are not readily apparent from the Schedules and Statement of Financial Affairs. It is important for the United States Trustee to have a complete understanding of the Debtor's financial picture in order to properly evaluate this case.

Please note this production of documents does not waive your obligation to provide the Chapter 7 trustee with the documents required pursuant to 11 U.S.C. § 521(e)(2).

Please direct your response to this letter to Marlene Fouche, Bankruptcy Auditor, **Via Email only - Reply All**, with a copy to the Chapter 7 Trustee. Responses via zip drives, zip files/folders need to be unlocked/password transmitted. Email submissions are to be no larger than **10mbs**. *Omit complete account numbers, **leaving only the last 4 digits** as disclosed on all documents submitted in response to this letter.*

Be advised that if this office does not receive the requested information **on or before May 20, 2024**, the United States Trustee will file a motion with the court requesting that this case be dismissed. If you have any additional questions regarding this letter, please contact Marlene Fouche at Marlene.Fouche@usdoj.gov.

Thank you, for your cooperation.

Marlene Fouche, Auditor

Office of the United States Trustee

Region 16 - Los Angeles

915 West Wilshire Blvd

Suite 1850

Los Angeles, CA 90017

(213) 894-6811 / 894-2603 (f)

--

Benjamin Heston, Esq.
NEXUS BANKRUPTCY

--

Benjamin Heston, Esq.
NEXUS BANKRUPTCY

--

Benjamin Heston, Esq.
NEXUS BANKRUPTCY

From: [Ben Heston](#)
To: [Fouche, Marlene \(USTP\)](#)
Cc: [Madoyan, Noreen \(USTP\)](#); [Heide Kurtz \(hkurtz@hkurtzco.com\)](#)
Subject: [EXTERNAL] Re: VILLACORTA, GLADYS GRACE LIAD 24-13211-DS Response due 05/20
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See attached.

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On Wed, May 8, 2024 at 1:34 PM Fouche, Marlene (USTP)

<Marlene.Fouche@usdoj.gov> wrote:



TOTAL DUE

\$215.37

Your bill is due by Oct 09, 2023.

AutoPay is scheduled for Oct 07, 2023 using Visa
****7474.Thanks for paying your last bill of \$215.37
on Sep 08, 2023.**Hi Cesar,****Here's your bill for September.**

Congrats, you paid off your installments! See the details below.

PLANS

\$160.00

5 VOICE LINES = \$110.00 | 1 CONNECTED DEVICE = \$50.00

This month's charges are the same as last month's

- Account received a total AutoPay discount of \$30.00.
- Guess what? You have unlimited minutes, texts and data with your plan!

Your plan includes:

- 5G access at no extra cost
- Best-in-wireless scam protection

Details @ t-mo.co/Plans

EQUIPMENT

\$26.25

1 HANDSET = \$26.25

This month's charges are the same as last month's

- You have paid off your equipment installment plan(s). Congrats on owning your device please go to <https://t-mo.co/cell-phones> to view our latest devices.
- One month closer to owning your device!

The T-Mobile® app lets you easily:

- Pay your bill anytime/anywhere
- Upgrade your phone
- Get 24/7 support

Download the app @ t-mo.co/App

SERVICES

\$29.12

2 ONE PLAN FEATURES = \$20.00 | 1 T-MOBILE SUBSCRIPTION = \$9.12

This month's charges are the same as last month's

- Call, text, and browse in Mexico & Canada. No setup. No roaming charges. Your phone works the moment you arrive.

Data and texting abroad:

- Stay connected and up to date in 215+ countries & destinations around the world with non-stop data and texts

Details @ t-mo.co/IntRoam

YOU HAVE

\$46.00

IN TOTAL SAVINGS

With your promotions and
discounts, you are saving
some extra cash!**Largest.
Fastest.
Most Awarded
5G Network.**

YOU ARE COVERED IN

215⁺countries & destinations
w/ text and data




THIS BILL SUMMARY

	Line Type	Plans	Equipment	Services	Total
Totals		\$160.00	\$26.25	\$29.12	\$215.37
Account		\$80.00	-	\$9.12	\$89.12
(213) 435-2747	Voice	Included	-	\$10.00	\$10.00
(619) 838-4493 - Suspended	Voice	Included	-	-	\$0.00
(213) 435-2730	Voice	\$10.00	-	\$10.00	\$20.00
(619) 964-1068	Voice	\$10.00	-	-	\$10.00
(442) 354-5252	Mobile Internet	\$50.00	-	-	\$50.00
(619) 394-6121	Voice	\$10.00	\$26.25	-	\$36.25

DETAILED CHARGES

PLANS \$160.00

REGULAR CHARGES Sep 17 - Oct 16 \$160.00

 Charged in advance for bill period Sep 17 - Oct 17. Changes made after Sep 16 will be shown on a future bill.

VOICE LINES

Account	ONE Plan Military	\$80.00
	Includes \$10.00 AutoPay Discount	
(213) 435-2747	ONE Plan Military	Included
(619) 838-4493	ONE Plan Military	Included
(213) 435-2730	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	
(619) 964-1068	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	
(619) 394-6121	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	

CONNECTED DEVICE

(442) 354-5252	T-Mobile Home Internet	\$50.00
	Includes \$5.00 AutoPay Discount	

EQUIPMENT \$26.25

HANDSETS

Account	ID: 202012191101832023, Your installment plan has been completed, pending any reversal of payments that may occur.	
(619) 394-6121	iPhone 12	\$26.25
	ID: 202304031107598281, Balance: \$498.74, Installment 6 of 24	

SERVICES \$29.12

ONE PLAN FEATURES

(213) 435-2730	ONE Plus	\$10.00
(213) 435-2747	ONE Plus	\$10.00

YOU SAVED

TOTAL \$46.00

AutoPay discounts \$30.00
\$5 discount per line for applicable lines on your account

Subscription discounts \$16.00
Discounts on subscription services through T-Mobile

YOU USED

664.32^{GB}
of unlimited data
with ONE Plan

T-Mobile Internet 614.02^{GB}

(213) 435-2747 23.85^{GB}

(213) 435-2730 22.61^{GB}

(619) 394-6121 2.05^{GB}

(619) 964-1068 1.79^{GB}

(619) 838-4493 0.00^{GB}



T-MOBILE SUBSCRIPTION

Your subscriptions automatically renew until you cancel. Cancel anytime. To manage, visit t-mo.co/managesubs

Account	Netflix Premium with Family Allowances (\$25 value)	\$9.00
	Includes \$16.00 Family Discount	

TAXES & FEES

T-Mobile fees & charges	\$0.12
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TAXES & FEES BREAKDOWN

Below are your T-Mobile fees & charges and your government taxes & fees

The taxes & fees below were summarized as line items above or included in your monthly charges. Here is the breakdown of the individual charges.

INCLUDED TAXES & FEES

1705 PETAL DR, San Diego CA 92114-6935	
ONE Plan Military - before taxes & fees	\$78.50
Included T-Mobile fees & charges	
Regulatory Fee	\$0.01
Included Government taxes & fees	
State 988	\$0.08
State 911	\$0.30
CA PPP Surcharge	\$1.11

ADDITIONAL T-MOBILE FEES & CHARGES

SERVICES		\$0.12
1705 PETAL DR, San Diego CA 92114-6935		
Account	Regulatory Fee	\$0.01
Account	Federal Universal Service Fund	\$0.11

1054 minutes of talk & 512 messages.

But no worries, it's all unlimited with ONE Plan!

Please see important unlimited plan details below



WHAT YOU NEED TO KNOW

ONE Plan recurring charges include applicable Government taxes & fees & T-Mobile fees & charges as determined by your primary place of use.

GOVERNMENT TAXES & FEES

Government taxes & fees includes sales, use, excise, public utility & E911 taxes & governmental charges & fees that we are required by law to bill & remit. These may change without notice.

T-MOBILE FEES & CHARGES

These fees & charges are T-Mobile recovery charges, not governmentally imposed taxes. What is included in the fees & charges may vary by locale & rate plan & is subject to change. These include:

- Regulatory Programs & Telco Recovery Fee, collected & retained by us:
 - Regulatory Programs Fee (\$0.50 for voice lines, \$0.12 data only lines) - defrays certain costs for funding & complying with government mandates, programs, & obligations, like E911 and local number portability
 - Telco Recovery Fee (\$2.99 for voice lines, \$1.28 data only lines) - defrays costs and charges imposed on us by other carriers for delivery of calls from our customers to theirs and for certain network facilities (e.g. leases), operations, and services we obtain to provide you service
- State & federal Universal Service Fund charges (recovers charges imposed on us by the government to support universal service).
- Other governmental assessments including, without limitation, gross receipt & excise taxes.

LATE FEES

Late Fees, which are assessed up to the highest amount permitted by law, may apply on unpaid balances. This fee is a liquidated damage & not a penalty.

PAYMENT BY CHECK

When you pay by check, you authorize us to either use information from your check to make a one-time electronic fund transfer (EFT) from your account or to process the payment as a check transaction. If we process your payment by EFT, the funds may be withdrawn the same day we receive your check, & your canceled check will not be returned. If payment is returned unpaid, you authorize us to collect additional fees as outlined in the Terms & Conditions of Service at t-mobile.com/terms-conditions. Call (800) 937-8997 with any questions.

EQUIPMENT PROTECT

Equipment Protect by Assurant (in Puerto Rico: CAPIC) is for the equipment repair & replacement you may have selected. See Equipment Protection Terms & Conditions at t-mobile.com for details.

CONTACT US

Contact us with any questions or disputes about your service or bill:



PHONE

Call (800) 937-8997 or 611 from your T-Mobile device-TTY (877) 296-1018.



MAIL

Write to T-Mobile Customer Relations, P.O. Box 37380, Albuquerque, NM 87176-7380.



ONLINE

View your bill & usage details online by logging into your account at t-mobile.com.

View Terms & Conditions online at t-mobile.com/terms-conditions and our Open Internet Policy at t-mobile.com/openinternet.

Partial megabytes (MB) rounded up. 1024 MB = 1 GB

You can contact the California Public Utilities Commission with any complaints that T-Mobile was unable to resolve at Consumer Affairs Branch, 505 Van Ness Ave., San Francisco, CA 94102, or by calling (800) 649-7570 or TDD (800) 229-6846, or visiting their website at <http://www.cpuc.ca.gov/complaints>. If you have hearing or speaking limitations and want assistance from the California Relay Service, Dial 711 or visit <http://ddtp.cpuc.ca.gov/relay.aspx> for more information.

For information about the California PPP Surcharge, please see <https://t-mo.co/CPUC>

During congestion, heavy data users and customers choosing lower-prioritized plans may notice lower speeds than other customers. Video typically streams on smartphone/tablet at DVD quality (480p), unless you add HD-capable (1080p) plan/feature. High-speed tethering up to allotment, if any, and then max 3G speeds. See plan for details.

CHANGE OF ADDRESS

Effective date

Address

City

State

ZIP

Home phone

Business phone

CESAR GARCIA
1705 PETAL DR
SAN DIEGO CA 92114-6935



T-Mobile MONEY goes further.

Join in minutes, and say goodbye to checking account and overdraft fees.

Get started at t-mo.co/MONEYBill

T-Mobile MONEY

ACCOUNTS HELD AT
BankMobile Member FDIC
A Division of Customers Bank



Please detach this portion and return with your payment. Please make sure address shows through window.

Pay by phone: *PAY(*729) Pay online: t-mobile.com/pay



T-MOBILE
PO BOX 742596
CINCINNATI OH 45274-2596

Total due by Oct 09, 2023

\$215.37

You are paying by AutoPay

Amount enclosed

CESAR GARCIA
Account number: 963537851

☐ Change your address - Check box and provide new address on reverse side

0409635378511009230000215370921146935



TOTAL DUE

\$215.39

Your bill is due by Oct 9, 2393. h

AutoPay is scheduled for Oct 9 2393. using *isa 4444TVTh

kf anps for \$aying your last bill o7135 h V onBct9V393. h

Hi Cesar,

Here's your bill for October.

C itf your 8 OmPlan \$lans2you f aOe unli! ited talp2tewt and datahk f anps for being an av eso! e kG obile custo! erx

PLANS

\$160.00

5 VS0 CE0 CN= \$110.00 | 1 I S L L C I T C D D C V 0 C= \$50.00

This month's charges are the same as last month's

- Account receiOed a total AutoPay discount o71. 9199h
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- BestOnG ireless sca! \$rotection

@etails/ tG ohcoqPlans

EQUIPMENT

\$26.25

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This month's charges are the same as last month's

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SERVICES

\$29.14

2 S L C P E h L F C h T U R C N= \$20.00 | 1 T M S B 0 E C N U B N I R 0 P T 0 S L = \$9.1x

This month's charges are \$0.02 more

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YSU AhVC

\$x6.00

IN TOTAL SAVINGS

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Largest.
Fastest.
Most Awarded
5G Network.

YOU ARE COVERED IN

215+

countries & destinations
w/ text and data




THIS BILL SUMMARY

	Line Type	Plans	Equipment	Services	Total
Totals		\$160.00	\$26.25	\$29.14	\$215.39
Account		\$80.00	-	\$9.14	\$89.14
(213) 435-2747	Voice	Included	-	\$10.00	\$10.00
(619) 838-4493 - Suspended	Voice	Included	-	-	\$0.00
(213) 435-2730	Voice	\$10.00	-	\$10.00	\$20.00
(619) 964-1068	Voice	\$10.00	-	-	\$10.00
(442) 354-5252	Mobile Internet	\$50.00	-	-	\$50.00
(619) 394-6121	Voice	\$10.00	\$26.25	-	\$36.25

DETAILED CHARGES

PLANS \$160.00

REGULAR CHARGES Oct 17 - Nov 16 \$160.00

 Charged in advance for bill period Oct 17 - Nov 16. Changes made after Oct 16 will be shown on a future bill.

VOICE LINES

Account	ONE Plan Military	\$80.00
	Includes \$10.00 AutoPay Discount	
(213) 435-2747	ONE Plan Military	Included
(619) 838-4493	ONE Plan Military	Included
(213) 435-2730	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	
(619) 964-1068	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	
(619) 394-6121	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	

CONNECTED DEVICE

(442) 354-5252	T-Mobile Home Internet	\$50.00
	Includes \$5.00 AutoPay Discount	

EQUIPMENT \$26.25

HANDSET

(619) 394-6121	iPhone 12	\$26.25
	ID: 202304031107598281, Balance: \$472.49, Installment 7 of 24	

SERVICES \$29.14

ONE PLAN FEATURES

(213) 435-2730	ONE Plus	\$10.00
(213) 435-2747	ONE Plus	\$10.00

YOU SAVED

TOTAL \$46.00

AutoPay discounts \$30.00
\$5 discount per line for applicable lines on your account

Subscription discounts \$16.00
Discounts on subscription services through T-Mobile

YOU USED

847.55^{GB}
of unlimited data
with ONE Plan

T-Mobile Internet 772.12^{GB}

(213) 435-2747 47.73^{GB}

(213) 435-2730 17.67^{GB}

(619) 964-1068 7.11^{GB}

(619) 394-6121 2.92^{GB}

(619) 838-4493 0.00^{GB}



T-MOBILE SUBSCRIPTION

Your subscriptions automatically renew until you cancel. Cancel anytime. To manage, visit t-mo.co/managesubs

Account	Netflix Premium with Family Allowances (\$25 value)	\$9.00
	Includes \$16.00 Family Discount	

TAXES & FEES

T-Mobile fees & charges	\$0.14
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TAXES & FEES BREAKDOWN

Below are your T-Mobile fees & charges and your government taxes & fees

The taxes & fees below were summarized as line items above or included in your monthly charges. Here is the breakdown of the individual charges.

INCLUDED TAXES & FEES

1705 PETAL DR, San Diego CA 92114-6935	
ONE Plan Military - before taxes & fees	\$78.50
Included T-Mobile fees & charges	
Regulatory Fee	\$0.01
Included Government taxes & fees	
State 988	\$0.08
State 911	\$0.30
CA PPP Surcharge	\$1.11

ADDITIONAL T-MOBILE FEES & CHARGES

SERVICES		\$0.14
1705 PETAL DR, San Diego CA 92114-6935		
Account	Regulatory Fee	\$0.01
Account	Federal Universal Service Fund	\$0.13

1663 minutes of talk & 524 messages.

But no worries, it's all unlimited with ONE Plan!

Please see important unlimited plan details below



WHAT YOU NEED TO KNOW

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CESAR GARCIA
1705 PETAL DR
SAN DIEGO CA 92114-6935



T-Mobile MONEY goes further.

Join in minutes, and say goodbye to checking account and overdraft fees.

Get started at t-mo.co/MONEYBill

T-Mobile MONEY

ACCOUNTS HELD AT
BankMobile Member FDIC
A Division of Customers Bank



Please detach this portion and return with your payment. Please make sure address shows through window.

Pay by phone: *PAY(*729) Pay online: t-mobile.com/pay



T-MOBILE
PO BOX 742596
CINCINNATI OH 45274-2596

Total due by Nov 09, 2023

\$215.39

You are paying by AutoPay

Amount enclosed

CESAR GARCIA
Account number: 963537851

☐ Change your address - Check box and provide new address on reverse side

0409635378511109230000215395921146935



TOTAL DUE

\$215.39

Your bill is due by Oct 09, 2023.

AutoPay is scheduled for Oct 07, 2023 using Visa
****7474.

Thanks for paying your last bill of \$215.39
on Sep 07, 2023.

Hi Cesar,

Here's your bill for November.

Congratulations! Plan plans, you have unlimited talk, text and data. Thanks for
being an awesome T-Mobile customer-

PLANS

\$160.00

5G V0 CECL N=110\$00 . 11 VSSC | CT TC 0 CN=50\$00

This month's charges are the same as last month's

- Account received a total AutoPay discount of \$30.00.
- Guess that you have unlimited minutes, texts and data with your plan-

Details / [t?wo.coqPlans](#)

- 5D access at no extra cost
- Best-in-Class wireless scam protection

Details / [t?wo.coqPlans](#)

EQUIPMENT

\$26.25

1 AhSTLC N=26\$25

This month's charges are the same as last month's

- Come on closer to owning your device-

Details / [t?wo.coqApp](#)

- Pay your bill anytime anywhere
- Upgrade your phone
- Get 24/7 support

Details / [t?wo.coqApp](#)

SERVICES

\$29.14

2 VSCFEH S UCh RBCL N=20\$00 . 1 | N Vx CLRLxLI BCF | VS N=9\$1g

This month's charges are the same as last month's

- All, text, and browse in x evico :) anada. So setup.
So roaming charges. Your phone works the way you
want it.

Details / [t?wo.coqApp](#)

- Stay connected and up to date in 215M
countries : destinations around the world
with non-stop data and texts

Details / [t?wo.coqApp](#)

DVR Ahf C

= \$6.00

IN TOTAL SAVINGS

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di: ceYny: , PeY aus : apinW
: ev s s4yua ca: -!

Largest. Fastest. Most Awarded 5G Network.

YOU ARE COVERED IN

215+

countries & destinations
w/ text and data




THIS BILL SUMMARY

	Line Type	Plans	Equipment	Services	Total
Totals		\$160.00	\$26.25	\$29.14	\$215.39
Account		\$80.00	-	\$9.14	\$89.14
(213) 435-2747	Voice	Included	-	\$10.00	\$10.00
(619) 838-4493 - Suspended	Voice	Included	-	-	\$0.00
(213) 435-2730	Voice	\$10.00	-	\$10.00	\$20.00
(619) 964-1068	Voice	\$10.00	-	-	\$10.00
(442) 354-5252	Mobile Internet	\$50.00	-	-	\$50.00
(619) 394-6121	Voice	\$10.00	\$26.25	-	\$36.25

DETAILED CHARGES

PLANS \$160.00

REGULAR CHARGES Nov 17 - Dec 16 \$160.00

 Charged in advance for bill period Nov 17 - Dec 17. Changes made after Nov 16 will be shown on a future bill.

VOICE LINES

Account	ONE Plan Military	\$80.00
	Includes \$10.00 AutoPay Discount	
(213) 435-2747	ONE Plan Military	Included
(619) 838-4493	ONE Plan Military	Included
(213) 435-2730	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	
(619) 964-1068	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	
(619) 394-6121	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	

CONNECTED DEVICE

(442) 354-5252	T-Mobile Home Internet	\$50.00
	Includes \$5.00 AutoPay Discount	

EQUIPMENT \$26.25

HANDSET

(619) 394-6121	iPhone 12	\$26.25
	ID: 202304031107598281, Balance: \$446.24, Installment 8 of 24	

SERVICES \$29.14

ONE PLAN FEATURES

(213) 435-2730	ONE Plus	\$10.00
(213) 435-2747	ONE Plus	\$10.00

YOU SAVED

TOTAL \$46.00

AutoPay discounts \$30.00
\$5 discount per line for applicable lines on your account

Subscription discounts \$16.00
Discounts on subscription services through T-Mobile

YOU USED

1083.67^{GB}
of unlimited data
with ONE Plan

T-Mobile Internet 1006.67^{GB}

(213) 435-2730 25.78^{GB}

(213) 435-2747 23.24^{GB}

(619) 964-1068 16.65^{GB}

(619) 394-6121 11.33^{GB}

(619) 838-4493 0.00^{GB}



T-MOBILE SUBSCRIPTION

Your subscriptions automatically renew until you cancel. Cancel anytime. To manage, visit t-mo.co/managesubs

Account	Netflix Premium with Family Allowances (\$25 value)	\$9.00
	Includes \$16.00 Family Discount	

TAXES & FEES

T-Mobile fees & charges	\$0.14
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TAXES & FEES BREAKDOWN

Below are your T-Mobile fees & charges and your government taxes & fees

The taxes & fees below were summarized as line items above or included in your monthly charges. Here is the breakdown of the individual charges.

INCLUDED TAXES & FEES

1705 PETAL DR, San Diego CA 92114-6935	
ONE Plan Military - before taxes & fees	\$78.50
Included T-Mobile fees & charges	
Regulatory Fee	\$0.01
Included Government taxes & fees	
State 988	\$0.08
State 911	\$0.30
CA PPP Surcharge	\$1.11

ADDITIONAL T-MOBILE FEES & CHARGES

SERVICES		\$0.14
1705 PETAL DR, San Diego CA 92114-6935		
Account	Regulatory Fee	\$0.01
Account	Federal Universal Service Fund	\$0.13

1020 minutes of talk & 666 messages.

But no worries, it's all unlimited with ONE Plan!

Please see important unlimited plan details below



WHAT YOU NEED TO KNOW

Plan recurring charges include applicable DoBerrnwent taves : fees : T?x obile fees : charges as deterwined by your priwary place of use.

For information about blocking third?party charges and Gays to preBent fraud you can Bisit t?w obile.cow qresponsibility?consumer?info?additional?info?state?regulatory?information

GVf CBS b CS | hXCL & UCCL

DoBerrnwent taves : fees includes sales, use, evcise, public utility : ! 911 taves : goBerrnwental charges : fees that Ge are re_ uired by laG to bill : rewit. These way change Githout notice.

hVxUCCL & hBGCL

These fees : charges are T?x obile recoBery charges, not goBerrnwentally iw posed taves. C hat is included in the fees : charges way Bary by locale : rate plan : is subAct to change. These includej

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b. Telco NecoBery Fee l\$2.99 for 8oice lines, \$1.2+ data only linesR? defrays costs and charges iw posed on us by other carriers for deliBery of calls frow our customers to theirs and for certain netGork facilities le.g. leasesR operations, and serBices Ge obtain to proBide you serBice
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Late Fees, Ghich are assessed up to the highest awount perw itted by laG, way apply on unpaid balances. This fee is a li_ uidated dawage : not a penalty.

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mSL&
VieG your bill : usage details online by logging into your account at t?w obile.cow .

VieG Terws :) onditions online at t?w obile.cow qterws?conditions and our mpen &ternet Policy at t?w obile.cow qppeninternet.

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You can contact the) alifornia Public (tilities) owwission Gith any cow complaints that T?x obile Gas unable to resolBe at) onsuwer Affairs Branch, 505 Van Sess ABe., Uan Francisco,) A 94102, or by calling l+00R649?7570 or TOO l+00R229?6+46, or Bisiting their Gebsite at httpjqGGG.cpuc.ca.goBcpow complaints. & you haBe hearing or speaking liw itations and Gant assistance frow the) alifornia Nelay UerBice, Oial 711 or Bisit httpjqddtp.cpuc.ca.goBqrelay.aspv for wore information.
For information about the) alifornia PPP Uurcharge, please see httpsjq?w o.coqj P()

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CHANGE OF ADDRESS		! ffectiBe date
Address		
) ity		Utate Z&P
E owe phone		Business phone

CESAR GARCIA
1705 PETAL DR
SAN DIEGO CA 92114-6935



T-Mobile MONEY goes further.

Join in minutes, and say goodbye to checking account and overdraft fees.

Get started at t-mo.co/MONEYBill

T-Mobile MONEY

ACCOUNTS HELD AT
BankMobile Member FDIC
A Division of Customers Bank



Please detach this portion and return with your payment. Please make sure address shows through window.

Pay by phone: *PAY(*729) Pay online: t-mobile.com/pay



T-MOBILE
PO BOX 742596
CINCINNATI OH 45274-2596

Total due by Dec 09, 2023

\$215.39

You are paying by AutoPay

Amount enclosed

CESAR GARCIA
Account number: 963537851

☐ Change your address - Check box and provide new address on reverse side

0409635378511209230000215394921146935



TOTAL DUE

\$215.39

Your bill is due by Jan 09, 2024.

AutoPay is scheduled for Jan 07, 2024 using Visa ****7474.

Thanks for paying your last bill of \$215.39 on Dec 07, 2023.

Hi Cesar,

Here's your bill for Decet ber.

With your ONE Plan plans, you have unlimited talk, text and data. Thanks for being an awesome T-Mobile customer!

PLANS

\$160.00

5 VOICE LINES = \$110.00 | 1 CONNECTED DEVICE = \$50.00

- This t omh's charges are rhe sat e as lasnt omh's
- Account received a total AutoPay discount of \$30.00.
 - Guess what? You have unlimited minutes, texts and data with your plan!

Your plan includes:

- 5G access at no extra cost
- Best-in-wireless scam protection

Details @ t-mo.co/Plans

EQUIPMENT

\$26.25

1 HANDSET = \$26.25

- This t omh's charges are rhe sat e as lasnt omh's
- One month closer to owning your device!

The T-Mobile® app lets you easily:

- Pay your bill anytime/anywhere
- Upgrade your phone
- Get 24/7 support

Download the app @ t-mo.co/App

SERVICES

\$29.14

2 ONE PLAN FEATURES = \$20.00 | 1 T-MOBILE SUBSCRIPTION = \$9.14

- This t omh's charges are rhe sat e as lasnt omh's
- Call, text, and browse in Mexico & Canada. No setup. No roaming charges. Your phone works the moment you arrive.

Data and texting abroad:

- Stay connected and up to date in 215+ countries & destinations around the world with non-stop data and texts

Details @ t-mo.co/IntRoam

YOU HAVE

\$46.00

IN TOTAL SAVINGS

With your promotions and discounts, you are saving some extra cash!

Largest.
Fastest.
Most Awarded
5G Network.

YOU ARE COVERED IN

215+

countries & destinations
w/ text and data




THIS BILL SUMMARY

	Line Type	Plans	Equipment	Services	Total
Totals		\$160.00	\$26.25	\$29.14	\$215.39
Account		\$80.00	-	\$9.14	\$89.14
(213) 435-2747	Voice	Included	-	\$10.00	\$10.00
(619) 838-4493 - Suspended	Voice	Included	-	-	\$0.00
(213) 435-2730	Voice	\$10.00	-	\$10.00	\$20.00
(619) 964-1068	Voice	\$10.00	-	-	\$10.00
(442) 354-5252	Mobile Internet	\$50.00	-	-	\$50.00
(619) 394-6121	Voice	\$10.00	\$26.25	-	\$36.25

DETAILED CHARGES

PLANS \$160.00

REGULAR CHARGES Dec 17 - Jan 16 \$160.00

 Charged in advance for bill period Dec 17 - Jan 16. Changes made after Dec 16 will be shown on a future bill.

VOICE LINES

Account	ONE Plan Military	\$80.00
	Includes \$10.00 AutoPay Discount	
(213) 435-2747	ONE Plan Military	Included
(619) 838-4493	ONE Plan Military	Included
(213) 435-2730	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	
(619) 964-1068	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	
(619) 394-6121	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	

CONNECTED DEVICE

(442) 354-5252	T-Mobile Home Internet	\$50.00
	Includes \$5.00 AutoPay Discount	

EQUIPMENT \$26.25

HANDSET

(619) 394-6121	iPhone 12	\$26.25
	ID: 202304031107598281, Balance: \$419.99, Installment 9 of 24	

SERVICES \$29.14

ONE PLAN FEATURES

(213) 435-2730	ONE Plus	\$10.00
(213) 435-2747	ONE Plus	\$10.00

YOU SAVED

TOTAL \$46.00

AutoPay discounts \$30.00
\$5 discount per line for applicable lines on your account

Subscription discounts \$16.00
Discounts on subscription services through T-Mobile

YOU USED

751.73^{GB}
of unlimited data
with ONE Plan

T-Mobile Internet 719.56^{GB}

(213) 435-2730 16.75^{GB}

(213) 435-2747 12.38^{GB}

(619) 964-1068 1.94^{GB}

(619) 394-6121 1.10^{GB}

(619) 838-4493 0.00^{GB}



T-MOBILE SUBSCRIPTION

Your subscriptions automatically renew until you cancel. Cancel anytime. To manage, visit t-mo.co/managesubs

Account	Netflix Premium with Family Allowances (\$25 value) Includes \$16.00 Family Discount	\$9.00
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TAXES & FEES

T-Mobile fees & charges	\$0.14
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**2015 minutes of talk &
748 messages.**

**But no worries, it's all
unlimited with ONE Plan!**

Please see important unlimited plan details
below

TAXES & FEES BREAKDOWN

Below are your T-Mobile fees & charges and your government
taxes & fees



The taxes & fees below were summarized as line
items above or included in your monthly charges.
Here is the breakdown of the individual charges.

INCLUDED TAXES & FEES

1705 PETAL DR, San Diego CA 92114-6935	
ONE Plan Military - before taxes & fees	\$78.50
Included T-Mobile fees & charges	
Regulatory Fee	\$0.01
Included Government taxes & fees	
State 988	\$0.08
State 911	\$0.30
CA PPP Surcharge	\$1.11

ADDITIONAL T-MOBILE FEES & CHARGES

SERVICES		\$0.14
1705 PETAL DR, San Diego CA 92114-6935		
Account	Regulatory Fee	\$0.01
Account	Federal Universal Service Fund	\$0.13



WHAT YOU NEED TO KNOW

ONE Plan recurring charges include applicable Government taxes & fees & T-Mobile fees & charges as determined by your primary place of use.

GOVERNMENT TAXES & FEES

Government taxes & fees includes sales, use, excise, public utility & E911 taxes & governmental charges & fees that we are required by law to bill & remit. These may change without notice.

T-MOBILE FEES & CHARGES

These fees & charges are T-Mobile recovery charges, not governmentally imposed taxes. What is included in the fees & charges may vary by locale & rate plan & is subject to change. These include:

1. Regulatory Programs & Telco Recovery Fee, collected & retained by us:

a. Regulatory Programs Fee (\$0.50 for voice lines, \$0.12 data only lines) - defrays certain costs for funding & complying with government mandates, programs, & obligations, like E911 and local number portability

b. Telco Recovery Fee (\$2.99 for voice lines, \$1.28 data only lines) - defrays costs and charges imposed on us by other carriers for delivery of calls from our customers to theirs and for certain network facilities (e.g. leases), operations, and services we obtain to provide you service
2. State & federal Universal Service Fund charges (recovers charges imposed on us by the government to support universal service).
3. Other governmental assessments including, without limitation, gross receipt & excise taxes.

LATE FEES

Late Fees, which are assessed up to the highest amount permitted by law, may apply on unpaid balances. This fee is a liquidated damage & not a penalty.

PAYMENT BY CHECK

When you pay by check, you authorize us to either use information from your check to make a one-time electronic fund transfer (EFT) from your account or to process the payment as a check transaction. If we process your payment by EFT, the funds may be withdrawn the same day we receive your check, & your canceled check will not be returned. If payment is returned unpaid, you authorize us to collect additional fees as outlined in the Terms & Conditions of Service at t-mobile.com/terms-conditions. Call (800) 937-8997 with any questions.

EQUIPMENT PROTECT

Equipment Protect by Assurant (in Puerto Rico: CAPIC) is for the equipment repair & replacement you may have selected. See Equipment Protection Terms & Conditions at t-mobile.com for details.

CONTACT US

Contact us with any questions or disputes about your service or bill:



Call (800) 937-8997 or 611 from your T-Mobile device. TTY Dial 711 to reach a Relay Agent.



Write to T-Mobile Customer Relations, P.O. Box 37380, Albuquerque, NM 87176-7380.



View your bill & usage details online by logging into your account at t-mobile.com.

View Terms & Conditions online at t-mobile.com/terms-conditions and our Open Internet Policy at t-mobile.com/openinternet.

Partial megabytes (MB) rounded up. 1024 MB = 1 GB
You can contact the California Public Utilities Commission with any complaints that T-Mobile was unable to resolve at Consumer Affairs Branch, 505 Van Ness Ave., San Francisco, CA 94102, or by calling (800) 649-7570 or TDD (800) 229-6846, or visiting their website at <http://www.cpuc.ca.gov/complaints>. If you have hearing or speaking limitations and want assistance from the California Relay Service, Dial 711 or visit <http://ddtp.cpuc.ca.gov/relay.aspx> for more information.
For information about the California PPP Surcharge, please see <https://t-mo.co/CPUC>

During congestion, heavy data users and customers choosing lower-prioritized plans may notice lower speeds than other customers. Video typically streams on smartphone/tablet at DVD quality (480p), unless you add HD-capable (1080p) plan/feature. High-speed tethering up to allotment, if any, and then max 3G speeds. See plan for details.

CHANGE OF ADDRESS

Effective date

Address

CityStateZIP

Home phoneBusiness phone

CESAR GARCIA
1705 PETAL DR
SAN DIEGO CA 92114-6935



T-Mobile MONEY goes further.

Join in minutes, and say goodbye to checking account and overdraft fees.

Get started at t-mo.co/MONEYBill

T-Mobile MONEY

ACCOUNTS HELD AT
BankMobile Member **FDIC**
A Division of Customers Bank



Please detach this portion and return with your payment. Please make sure address shows through window.

Pay by phone: *PAY(*729) Pay online: t-mobile.com/pay



T-MOBILE
PO BOX 742596
CINCINNATI OH 45274-2596

Total due by Jan 09, 2024

\$215.39

You are paying by AutoPay

Amount enclosed

CESAR GARCIA
Account number: 963537851

☐ Change your address - Check box and provide new address on reverse side

0409635378510109240000215396921146935

TOTAL DUE

\$215.42

Your bill is due by **Jeb 09, 2024.**

AutoPay is scheduled for Feb 07, 2024 using Visa ****7474.

Thanks for paying your last bill of \$215.39
on Jan 07, 2024.

Hi Cesar,

Here's your bill for January.

With your ONE Plan plans, you have unlimited talk, text and data. Thanks for being an awesome T-Mobile customer!

PLANS

\$160.00

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This month's charges are the same as last month's

- Account received a total AutoPay discount of \$30.00.
- Guess what? You have unlimited minutes, texts and data with your plan!

r f pl arec icdrps: HA

- 5G access at no extra cost
- Best-in-wireless scam protection

@etails / t-mo.coUPlans

EQUIPMENT

\$26.25

40 - Su=LY\$0 26|250

This month's charges are the same as last month's

- One month closer to owning your device!

YM Yb® f t in y eaa n PHFf p: eHrFA

- Pay your bill anytime/anywhere
- Upgrade your phone
- Get 24/7 support

Download the app / t-mo.co.ukApp

SERVICES

\$29.17

Qd SLUN-SRL-YB4L=\$o 20|00oT dYb® | xOLfBx=E4C|YC S\$o 9|17o

This month's charges are \$0.03 more

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- stay connected and up to date in 215S countries + destinations around the world with non-stop data and texts

@etails / t-mo.coUntRoam

r | B h - OL

. 36¹⁰⁰

IN TOTAL SAVINGS

miPMFf pl alf v f Pf cHecs
siHdf pcPf, Ff p el: Hb! icW
Hf v : : qRle deHM

**Largest.
Fastest.
Most Awarded
5G Network.**

YOU ARE COVERED IN

215+

countries & destinations
w/ text and data




THIS BILL SUMMARY

	Line Type	Plans	Equipment	Services	Total
Totals		\$160.00	\$26.25	\$29.17	\$215.42
Account		\$80.00	-	\$9.17	\$89.17
(213) 435-2747	Voice	Included	-	\$10.00	\$10.00
(619) 838-4493 - Suspended	Voice	Included	-	-	\$0.00
(213) 435-2730	Voice	\$10.00	-	\$10.00	\$20.00
(619) 964-1068	Voice	\$10.00	-	-	\$10.00
(442) 354-5252	Mobile Internet	\$50.00	-	-	\$50.00
(619) 394-6121	Voice	\$10.00	\$26.25	-	\$36.25

DETAILED CHARGES

PLANS \$160.00

REGULAR CHARGES Jan 17 - Feb 16 \$160.00

 Charged in advance for bill period Jan 17 - Feb 16. Changes made after Jan 16 will be shown on a future bill.

VOICE LINES

Account	ONE Plan Military	\$80.00
	Includes \$10.00 AutoPay Discount	
(213) 435-2747	ONE Plan Military	Included
(619) 838-4493	ONE Plan Military	Included
(213) 435-2730	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	
(619) 964-1068	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	
(619) 394-6121	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	

CONNECTED DEVICE

(442) 354-5252	T-Mobile Home Internet	\$50.00
	Includes \$5.00 AutoPay Discount	

EQUIPMENT \$26.25

HANDSET

(619) 394-6121	iPhone 12	\$26.25
	ID: 202304031107598281, Balance: \$393.74, Installment 10 of 24	

SERVICES \$29.17

ONE PLAN FEATURES

(213) 435-2730	ONE Plus	\$10.00
(213) 435-2747	ONE Plus	\$10.00

YOU SAVED

TOTAL \$46.00

AutoPay discounts	\$30.00
\$5 discount per line for applicable lines on your account	
Subscription discounts	\$16.00
Discounts on subscription services through T-Mobile	

YOU USED

1187.98^{GB}
of unlimited data
with ONE Plan

T-Mobile Internet	1133.46^{GB}
(213) 435-2730	31.05^{GB}
(213) 435-2747	17.91^{GB}
(619) 964-1068	3.32^{GB}
(619) 394-6121	2.24^{GB}
(619) 838-4493	0.00^{GB}



T-MOBILE SUBSCRIPTION

Your subscriptions automatically renew until you cancel. Cancel anytime. To manage, visit t-mo.co/managesubs

Account	Netflix Premium - T-Mobile Offer	\$9.00
	Includes \$16.00 Family Discount	

TAXES & FEES

T-Mobile fees & charges	\$0.17
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TAXES & FEES BREAKDOWN

Below are your T-Mobile fees & charges and your government taxes & fees

The taxes & fees below were summarized as line items above or included in your monthly charges. Here is the breakdown of the individual charges.

INCLUDED TAXES & FEES

1705 PETAL DR, San Diego CA 92114-6935	
ONE Plan Military - before taxes & fees	\$78.50
Included T-Mobile fees & charges	
Regulatory Fee	\$0.01
Included Government taxes & fees	
State 988	\$0.08
State 911	\$0.30
CA PPP Surcharge	\$1.11

ADDITIONAL T-MOBILE FEES & CHARGES

SERVICES		\$0.17
1705 PETAL DR, San Diego CA 92114-6935		
Account	Regulatory Fee	\$0.03
Account	Federal Universal Service Fund	\$0.14

1628 minutes of talk & 607 messages.

But no worries, it's all unlimited with ONE Plan!

Please see important unlimited plan details below



WHAT YOU NEED TO KNOW

ONE Plan recurring charges include applicable Government taxes + fees + T-Mobile fees + charges as determined by your primary place of use.

GI OL4S® LSYY- XL= & RLL=

Government taxes + fees includes sales, use, excise, public utility + E911 taxes + governmental charges + fees that we are required by law to bill + remit. These may change without notice.

Yb® I xQL RLL= & Eh- 4GL=

These fees + charges are T-Mobile recovery charges, not governmentally imposed taxes. What is included in the fees + charges may vary by locale + rate plan + is subject to change. These include:

- Regulatory Programs + Telco Recovery Jee, collected + retained by us:
 - Regulatory Programs Jee (\$0.50 for voice lines, \$0.12 data only lines) - defrays certain costs for funding + complying with government mandates, programs, + obligations, like E911 and local number portability
 - Telco Recovery Jee (\$2.99 for voice lines, \$1.28 data only lines) - defrays costs and charges imposed on us by other carriers for delivery of calls from our customers to theirs and for certain network facilities (e.g. leases), operations, and services we obtain to provide you service
- State + federal Universal Service Fund charges (recovers charges imposed on us by the government to support universal service).
- Other governmental assessments including, without limitation, gross receipt + excise taxes.

N- YL RLL=

Late Jees, which are assessed up to the highest amount permitted by law, may apply on unpaid balances. This fee is a liquidated damage + not a penalty.

U-r® LSYYr EhLEK

When you pay by check, you authorize us to either use information from your check to make a one-time electronic fund transfer (EFT) from your account or to process the payment as a check transaction. If we process your payment by EFT, the funds may be withdrawn the same day we receive your check, + your canceled check will not be returned. If payment is returned unpaid, you authorize us to collect additional fees as outlined in the Terms + Conditions of Service at t-mobile.com/terms-conditions. Call (800) 937-8997 with any questions.

LQBC® LSYYU4I YLEY

Equipment Protect by Assurant (in Puerto Rico: HAPIH) is for the equipment repair + replacement you may have selected. See Equipment Protection Terms + Conditions at t-mobile.com for details.

EI SY- EYB=

Contact us with any questions or disputes about your service or bill:



PHONE

Call (800) 937-8997 or 611 from your T-Mobile device. TTY @ 711 to reach a Relay Agent.



MAIL

Write to T-Mobile Customer Relations, P.O. Box 37380, Albuquerque, NM 87176-7380.



ONLINE

View your bill + usage details online by logging into your account at t-mobile.com.

View Terms + Conditions online at t-mobile.com/terms-conditions and our Open Internet Policy at t-mobile.com/openinternet.

Partial megabytes (MB) rounded up. 1024 MB = 1 GB

You can contact the California Public Utilities Commission with any complaints that T-Mobile was unable to resolve at Consumer Affairs Branch, 505 Van Ness Ave., San Francisco, CA 94102, or by calling (800) 649-7570 or T@ (800) 229-6846, or visiting their website at <http://www.cpuc.ca.gov/complaints>. If you have hearing or speaking limitations and want assistance from the California Relay Service, @ 711 or visit <http://www.dtsdp.cpus.ca.gov/relay.aspx> for more information.

For information about the California PPP surcharge, please see <https://t-mo.co/UPCH>

During congestion, heavy data users and customers choosing lower-prioritized plans may notice lower speeds than other customers. Video typically streams on smartphone/tablet at @V@quality (480p), unless you add H@capable (1080p) plan/feature. High-speed tethering up to allotment, if any, and then max 3G speeds. See plan for details.

CHANGE OF ADDRESS

Effective date

Address

City

State

ZIP

Home phone

Business phone

CESAR GARCIA
1705 PETAL DR
SAN DIEGO CA 92114-6935



Keep more of your money.

Join in minutes, and say goodbye to account fees.

Get started at t-mobilemoney.com

T-Mobile
MONEY

POWERED BY
Bmtx

Accounts provided
by Customers Bank
Member FDIC



Please detach this portion and return with your payment. Please make sure address shows through window.

Pay by phone: *PAY(*729) Pay online: t-mobile.com/pay



T-MOBILE
PO BOX 742596
CINCINNATI OH 45274-2596

Total due by Feb 09, 2024

\$215.42

You are paying by AutoPay

Amount enclosed

CESAR GARCIA
Account number: 963537851

☐ Change your address - Check box and provide new address on reverse side

0409635378510209240000215429921146935



TOTAL DUE

\$222¹⁵.

Your bill is due by J ar 09, 2024.

AutoPay is scheduled for J ar 07, 2024 using Visa
****7474.

Thanks for paying your last bill of \$215.42
on 3 eb. 07, 2024.

3 9Hi Cesa

3i si rC, ' yso9ub sl i osyes, 1

D ith your WONPlan plans, you haEe unliv ited talk, tent and data. Thanks for
being an ax esov e Tw obile custov er-

f LAct

\$PNS¹⁵

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- Account receiEed a total AutoPay discount of \$M0.00.
- ! uees x hatGYou haEe unliv ited v inutes, tents and
data x ith your plan-

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- 5! access at no entra cost
- Bestwinw ireless scav protection

? etails @ tw o.co/Plans

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- Pay your bill anytiv e/anyx here
- Upgrade your phone
- ! et 24/7 support

? ox nload the app @ tw o.co/App

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inforv ation on your Oetflimbenefit and options, go to
[https://x.x.t-mobile.co.uk/support/plans/features/
rs504](https://x.x.t-mobile.co.uk/support/plans/features/rs504).

u cR: cdH PegPd4 cpaf cHh

- +tay connected and up to date in 215l
countries R destinations around the x orld
x ith nonvstop data and tents

? etails @ tw o.co/8tt(oav

r l R - MDL

56¹⁹⁹

Ic TOTAL t AVlc Gt

WsPb Ffl anaf mf Psf dAcdH
HsA f l dPA, Ffl cae Acvvd4
Af me egPac : cAb!

Largest.
Fastest.
Most Awarded
5G Network.

YOU ARE COVERED IN

215⁺

countries & destinations
w/ text and data



THIS BILL SUMMARY

	Line Type	Plans	Equipment	Services	Total
Totals		\$160.00	\$26.25	\$36.28	\$222.53
Account		\$80.00	-	\$16.28	\$96.28
(213) 435-2747	Voice	Included	-	\$10.00	\$10.00
(619) 838-4493 - Suspended	Voice	Included	-	-	\$0.00
(213) 435-2730	Voice	\$10.00	-	\$10.00	\$20.00
(619) 964-1068	Voice	\$10.00	-	-	\$10.00
(442) 354-5252	Mobile Internet	\$50.00	-	-	\$50.00
(619) 394-6121	Voice	\$10.00	\$26.25	-	\$36.25

DETAILED CHARGES

PLANS \$160.00

REGULAR CHARGES Feb 17 - Mar 16 \$160.00

Charged in advance for bill period Feb 17 - Mar 18. Changes made after Feb 16 will be shown on a future bill.

VOICE LINES

Account	ONE Plan Military	\$80.00
	Includes \$10.00 AutoPay Discount	
(213) 435-2747	ONE Plan Military	Included
(619) 838-4493	ONE Plan Military	Included
(213) 435-2730	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	
(619) 964-1068	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	
(619) 394-6121	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	

CONNECTED DEVICE

(442) 354-5252	T-Mobile Home Internet	\$50.00
	Includes \$5.00 AutoPay Discount	

EQUIPMENT \$26.25

HANDSET

(619) 394-6121	iPhone 12	\$26.25
	ID: 202304031107598281, Balance: \$367.49, Installment 11 of 24	

SERVICES \$36.28

ONE PLAN FEATURES

(213) 435-2730	ONE Plus	\$10.00
(213) 435-2747	ONE Plus	\$10.00

YOU SAVED

TOTAL \$36.99

AutoPay discounts \$30.00
\$5 discount per line for applicable lines on your account

Subscription discounts \$6.99
Discounts on subscription services through T-Mobile

YOU USED

897.78GB
of unlimited data
with ONE Plan

T-Mobile Internet 862.54GB

(213) 435-2730 23.15GB

(213) 435-2747 7.42GB

(619) 964-1068 2.95GB

(619) 394-6121 1.72GB

(619) 838-4493 0.00GB



T-MOBILE SUBSCRIPTION

Your subscriptions automatically renew until you cancel. Cancel anytime. To manage, visit t-mo.co/managesubs

Account	Netflix Premium - T-Mobile Offer Includes \$6.99 Family Discount	\$16.00
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TAXES & FEES

T-Mobile fees & charges	\$0.28
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**2825 minutes of talk &
536 messages.**

**But no worries, it's all
unlimited with ONE Plan!**

Please see important unlimited plan details
below

TAXES & FEES BREAKDOWN

Below are your T-Mobile fees & charges and your government
taxes & fees



The taxes & fees below were summarized as line
items above or included in your monthly charges.
Here is the breakdown of the individual charges.

INCLUDED TAXES & FEES

1705 PETAL DR, San Diego CA 92114-6935		
ONE Plan Military - before taxes & fees		\$78.50
Included T-Mobile fees & charges		
Regulatory Fee		\$0.01
Included Government taxes & fees		
State 988		\$0.08
State 911		\$0.30
CA PPP Surcharge		\$1.11

ADDITIONAL T-MOBILE FEES & CHARGES

SERVICES		\$0.28
1705 PETAL DR, San Diego CA 92114-6935		
Account	Regulatory Fee	\$0.04
Account	Federal Universal Service Fund	\$0.24



WHAT YOU NEED TO KNOW

Plan recurring charges include applicable! Our service fees are for mobile fees. Charges as determined by your primary place of use.

Service Fee

The Netflix benefit available for your plan has changed. For more details, visit [t-mobile.com/netflix](#).

Global Service & Taxes

Our service fees include sales, use, excise, public utility and 911 taxes. Our international charges are that we are required by law to bill for. These vary by change without notice.

Porting & E-Numbers

These fees are mobile recovery charges, not our service charges. That is included in the fees. Charges vary by local rate plan. Subject to change. These include:

- Regulatory Program: Telco fee, collected and retained by us.
 - Regulatory Program fee: \$0.50 for voice lines, \$0.12 data only lines. We defray certain costs for funding recovery with our service and mandates, programs, obligations, like 911 and local number portability.
 - Telco fee: \$2.99 for voice lines, \$1.20 data only lines. We defray costs and charges imposed on us by other carriers for delivery of calls from our customers to theirs and for certain network facilities (e.g., leases, operations, and services) to obtain and provide your service.
- State Federal Universal Service and Recovery charges imposed on us by the government to support universal service.
- Whether our service assessment including, without limitation, gross receipt and service taxes.

Monthly Service

Late fees, which are assessed up to the highest amount permitted by law, may apply on unpaid balances. This fee is a liquidated damage, not a penalty.

When You Pay by Check

When you pay by check, you authorize us to either use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. If we process your payment by N.T., the funds may be withdrawn the same day we receive your check. Your canceled check will not be returned. If payment is returned unpaid, you authorize us to collect additional fees as outlined in the Terms and Conditions of service at [t-mobile.com/terms](#). Call 800-977-9977 with any questions.

Our Service

Our service is provided by Assurance in Puerto Rico. This is for the equipment repair. Replace your device if selected. See our service Protection Terms and Conditions at [t-mobile.com](#) for details.

Service

Contact us with any questions or disputes about your service or bills.



Phone

Call 800-977-9977 or 811 from your mobile device. TTY: 711 to reach a Relay Agent.



Email

Write to mobile customer relations, P.O. Box 7770, Albuquerque, NM 87107.



Website

View your bill and usage details online by logging into your account at [t-mobile.com](#).

View Terms and Conditions online at [t-mobile.com/terms](#) and our Open Internet Policy at [t-mobile.com/openinternet](#).

Partial megabytes. Bounded up. 1024 MB = 1 GB. You can contact the California Public Utilities Commission with any complaints that mobile is unable to resolve at Consumer Affairs Branch, 505 Van Ness Ave., San Francisco, CA 94102, or by calling 800-497-5700 or 711. If you have hearing or speaking limitations and want assistance from the California Relay Service, call 711 or visit [http://ddtp.cpuc.ca.gov/relay.aspx](#) for more information. For information about the California PPP surcharge, please see [https://t-mobile.com/HPUH](#).

During congestion, heavy data users and customers choosing lower prioritized plans may notice slower speeds than other customers. Video typically streams on smartphone/tablet at 720p unless you add a capable 4G LTE plan/feature. High speed tethering up to allowed, if any, and then to maximum speeds. See plan for details.

Address		Effective date	
City		State	ZIP
Fax or phone		Business phone	

CESAR GARCIA
1705 PETAL DR
SAN DIEGO CA 92114-6935



Keep more of your money.

Join in minutes, and say goodbye to account fees.

Get started at t-mobilemoney.com

T Mobile
MONEY

POWERED BY
Bmtx

Accounts provided
by Customers Bank
Member FDIC



Please detach this portion and return with your payment. Please make sure address shows through window.

Pay by phone: *PAY(*729) Pay online: t-mobile.com/pay



T-MOBILE
PO BOX 742596
CINCINNATI OH 45274-2596

Total due by Mar 09, 2024

\$222.53

You are paying by AutoPay

Amount enclosed

CESAR GARCIA
Account number: 963537851

☐ Change your address - Check box and provide new address on reverse side

0409635378510309240000222531921146935



TOTAL DUE

\$222.15

Your bill is due by Aug 09, 2023.

AutoPay is scheduled for Aug 07, 2023 using Visa
****7373.

Thanks for paying your last bill of \$222.15
on time, 2023.

39Hi Cesa

3isic, 'yso9ubsl esfc1

With your 8CmPlan Plans, you have unlimited talk, text and data. Thanks for
being an awesome 4G LTE mobile customer

1 LAPN

\$56.00

601 6L6G-LSo 110000DdE! ==LEYLuLOE Lo 50000

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- Account received a total AutoPay discount of \$0.00.
- - Less What You have unlimited minutes, texts and
data with your Plan

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- pay access at no extra cost
- Best?in?Wireless scam Protection

@tails / t?wo.coqPlans

EQUit l EPT

\$26.25

601 - =u \$LYo 26250

Tc9Ch 'mcrCfcesgi Cesi nci Qeh i eCueQnh 'mcrC

- 8 new month closer to ending your device

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- Pay your bill anytime anywhere
- (Upgrade your Phone
- - et 23q7 su00ort

@Gnload the a00 / t?wo.coqA00

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IP TOTAL NARIP4N

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Hf m: : gype deHM

Largest.
Fastest.
Most Awarded
5G Network.

YOU ARE COVERED IN

215+

countries & destinations
w/ text and data




THIS BILL SUMMARY

	Line Type	Plans	Equipment	Services	Total
Totals		\$160.00	\$26.25	\$36.28	\$222.53
Account		\$80.00	-	\$16.28	\$96.28
(213) 435-2747	Voice	Included	-	\$10.00	\$10.00
(619) 838-4493 - Suspended	Voice	Included	-	-	\$0.00
(213) 435-2730	Voice	\$10.00	-	\$10.00	\$20.00
(619) 964-1068	Voice	\$10.00	-	-	\$10.00
(442) 354-5252	Mobile Internet	\$50.00	-	-	\$50.00
(619) 394-6121	Voice	\$10.00	\$26.25	-	\$36.25

DETAILED CHARGES

PLANS \$160.00

REGULAR CHARGES Mar 17 - Apr 16 \$160.00

 Charged in advance for bill period Mar 17 - Apr 16, Changes made after Mar 16 will be shown on a future bill.

VOICE LINES

Account	ONE Plan Military	\$80.00
	Includes \$10.00 AutoPay Discount	
(213) 435-2747	ONE Plan Military	Included
(619) 838-4493	ONE Plan Military	Included
(213) 435-2730	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	
(619) 964-1068	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	
(619) 394-6121	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	

CONNECTED DEVICE

(442) 354-5252	T-Mobile Home Internet	\$50.00
	Includes \$5.00 AutoPay Discount	

EQUIPMENT \$26.25

HANDSET

(619) 394-6121	iPhone 12	\$26.25
	ID: 202304031107598281, Balance: \$341.24, Installment 12 of 24	

SERVICES \$36.28

ONE PLAN FEATURES

(213) 435-2730	ONE Plus	\$10.00
(213) 435-2747	ONE Plus	\$10.00

YOU SAVED

TOTAL \$36.99

AutoPay discounts \$30.00
\$5 discount per line for applicable lines on your account

Subscription discounts \$6.99
Discounts on subscription services through T-Mobile

YOU USED

760.45^{GB}
of unlimited data
with ONE Plan

T-Mobile Internet 731.20^{GB}

(213) 435-2730 22.58^{GB}

(213) 435-2747 4.40^{GB}

(619) 964-1068 2.06^{GB}

(619) 394-6121 0.21^{GB}

(619) 838-4493 0.00^{GB}



T-MOBILE SUBSCRIPTION

Your subscriptions automatically renew until you cancel. Cancel anytime. To manage, visit t-mo.co/managesubs

Account	Netflix Premium - T-Mobile Offer	\$16.00
	Includes \$6.99 Family Discount	

TAXES & FEES

T-Mobile fees & charges	\$0.28
-------------------------	--------

TAXES & FEES BREAKDOWN

Below are your T-Mobile fees & charges and your government taxes & fees

The taxes & fees below were summarized as line items above or included in your monthly charges. Here is the breakdown of the individual charges.

INCLUDED TAXES & FEES

1705 PETAL DR, San Diego CA 92114-6935	
ONE Plan Military - before taxes & fees	\$78.50
Included T-Mobile fees & charges	
Regulatory Fee	\$0.01
Included Government taxes & fees	
State 988	\$0.08
State 911	\$0.30
CA PPP Surcharge	\$1.11

ADDITIONAL T-MOBILE FEES & CHARGES

SERVICES		\$0.28
1705 PETAL DR, San Diego CA 92114-6935		
Account	Regulatory Fee	\$0.04
Account	Federal Universal Service Fund	\$0.24

2348 minutes of talk & 450 messages.

But no worries, it's all unlimited with ONE Plan!

Please see important unlimited plan details below



WHAT YOU NEED TO KNOW

Our plan recurring charges include a one-time activation fee - of \$3.99. Other fees include: \$3.99 monthly service fee. Charges as determined by your primary place of use.

Global Service Taxes & Fees

Our international service includes sales, use, excise, public utility, and other taxes. International charges: fees that we are required by law to bill: rewrite. These may change without notice.

Yes! No! Taxes & Fees - Billed

These fees: charges are \$3.99 monthly service fee, not internationally imposed taxes. That is included in the fees: charges may vary by locale: rate plan: is subject to change. These include:

Monthly Regulatory Programs: \$3.99 monthly fee, collected: retained by us

- a. Regulatory Programs Fee \$3.99 for 10 lines, 10.24 data only lines: defrays certain costs for funding: covering your international mandates, programs, obligations, like 911 and local number portability
 - b. \$3.99 monthly fee for 10 lines, 10.24 data only lines: defrays costs and charges imposed on us by other carriers for delivery of calls from our customers to theirs and for certain network facilities. e.g. leases, operations, and services we obtain to provide you service
2. Update: federal (national) service fund charges: recovery charges imposed on us by the government to support universal service
- \$3.99 monthly international assessments including, without limitation, gross receipt: excise taxes.

Net Usage Charges

Late Fees, which are assessed up to the highest amount permitted by law, may apply on unpaid balances. This fee is a liquidated damage: not a penalty.

Financial Services - Eligible

When you pay by check, you authorize us to either use information from your check to initiate a one-time electronic fund transfer from your account or to process the payment as a check transaction. We process your payment by ACH, the funds may be withdrawn the same day we receive your check: your canceled check will not be returned. If payment is returned unpaid, you authorize us to collect additional fees as outlined in the terms: conditions of service at t-mobile.com/terms/conditions. All 006977 997 with any questions.

Lost or Stolen Device - FBI File

Our device protection by Assurant in Puerto Rico API is for the e-device repair: replacement you may have selected. Use our device protection terms: conditions at t-mobile.com for details.

Emergency Services

Contact us with any questions or disputes about your service or bill



PE 800
All 006977 997 or 1-800-977-8372 for your 45 mobile device. 44Y @al 7MM to reach a relay agent.



5 AN
Service to 45 mobile: customer relations, P.8. Box \$75 0, Albuquerque, NM 87101 775 0.



8 CLIN
View your bill: usage details online by logging into your account at t-mobile.com.

View terms: conditions online at t-mobile.com/terms/conditions and our 800 Internet Policy at t-mobile.com/terms/internet.

Partial megabytes \$5.00 rounded up. M23 5 B = M- B
You can contact the California Public Utilities Commission with any complaints that 45 mobile Gas unable to resolve at Consumer Affairs Branch, P.O. Box 93000, San Francisco, CA 94103, or by calling 800 392-7270 or 415 392-2291. 31, or visiting their website at <http://www.puc.ca.gov> for complaints. If you have a hearing or scheduling limitations and want assistance from the California relay service, @al 7MM: visit <http://www.puc.ca.gov> relay.aso for more information. For information about the California PPP surcharge, please see <http://www.puc.ca.gov> P()

During congestion, healthy data users and customers choosing lower-priority plans may notice lower speeds than other customers. Video typically streams on standard HD tablet at 4V quality 300 unless you add 4G LTE feature. High-speed tethering up to 100Mbps, if any, and then 4G LTE speeds. See plan for details.

Voice mail to 4evt is not compatible with LTE Voice mail. To continue using the service, please adjust your iPhone settings. For more tips and support, visit t-mobile.com/voicemail.

H3AP4E OF ADDRESSES		Effective date
Address		
City	State	ZIP
Home Phone	Business Phone	

CESAR GARCIA
1705 PETAL DR
SAN DIEGO CA 92114-6935



Keep more of your money.

Join in minutes, and say goodbye to account fees.

Get started at t-mobilemoney.com

T-Mobile
MONEY

POWERED BY
Bmtx

Accounts provided
by Customers Bank
Member FDIC



Please detach this portion and return with your payment. Please make sure address shows through window.

Pay by phone: *PAY(*729) Pay online: t-mobile.com/pay



T-MOBILE
PO BOX 742596
CINCINNATI OH 45274-2596

Total due by Apr 09, 2024

\$222.53

You are paying by AutoPay

Amount enclosed

CESAR GARCIA
Account number: 963537851

☐ Change your address - Check box and provide new address on reverse side

0409635378510409240000222530921146935



TOTAL DUE

\$222.52

Your bill is due by Oct 09, 2023.

AutoPay is scheduled for Oct 07, 2023 using Visa
****7373.

Thanks for paying your last bill of \$222.51
on 9/17/2023.

. 37 Hi Ces

. Hello, I'm your eAssistant

With your 5G Plan, you have unlimited talk, text and data. Thanks for
being an awesome 4G LTE mobile customer?

1 LAF S

\$1.00

601 ELONG-LSO 110000DdE! ==LEYLUaLOE Lo 50000

TP3 N, 60Pa hPCanHi CeHOPHi CNHCi d3 ON, 60Pa

- Account received a total AutoPay discount of \$10.00.
- Guess what- You have unlimited minutes, texts and data with your plan?

reflect on data: HA

- \$x access at no extra cost
- BestOnG wireless scalability protection

Details @ tG o.co/Plans

Ec Ug QEf T

\$2.15

d3 S=u\$LYo 26250

TP3 N, 60Pa hPCanHi CeHOPHi CNHCi d3 ON, 60Pa

- One month closer to owning your device?

Y-: YN f@at nee a yHPf l : nH2PA

- Pay your bill anytime/anywhere
- Upgrade your phone
- Get 23/7 support

Download the app @ tG o.co/Akk

SEI M7ES

\$1.25

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- (Stay connected and up to date in 2) \$:
countries & destinations around the world
with non-stop data and texts

Details @ tG o.co/Mt&oa!

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56.99

of TOTAL SAVINGS

Why- Pfl perfect myd i Hni s
sdHf l i yH Pfl np Hvd 4
Hf m: : gyp dnH!

Largest.
Fastest.
Most Awarded
5G Network.

YOU ARE COVERED IN

215+

countries & destinations
w/ text and data




THIS BILL SUMMARY

	Line Type	Plans	Equipment	Services	Total
Totals		\$160.00	\$26.25	\$36.27	\$222.52
Account		\$80.00	-	\$16.27	\$96.27
(213) 435-2747	Voice	Included	-	\$10.00	\$10.00
(619) 838-4493 - Suspended	Voice	Included	-	-	\$0.00
(213) 435-2730	Voice	\$10.00	-	\$10.00	\$20.00
(619) 964-1068	Voice	\$10.00	-	-	\$10.00
(442) 354-5252	Mobile Internet	\$50.00	-	-	\$50.00
(619) 394-6121	Voice	\$10.00	\$26.25	-	\$36.25

DETAILED CHARGES

PLANS \$160.00

REGULAR CHARGES Apr 17 - May 16 \$160.00

 Charged in advance for bill period Apr 17 - May 17. Changes made after Apr 16 will be shown on a future bill.

VOICE LINES

Account	ONE Plan Military	\$80.00
	Includes \$10.00 AutoPay Discount	
(213) 435-2747	ONE Plan Military	Included
(619) 838-4493	ONE Plan Military	Included
(213) 435-2730	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	
(619) 964-1068	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	
(619) 394-6121	ONE Plan Military 2+	\$10.00
	Includes \$5.00 AutoPay Discount	

CONNECTED DEVICE

(442) 354-5252	T-Mobile Home Internet	\$50.00
	Includes \$5.00 AutoPay Discount	

EQUIPMENT \$26.25

HANDSET

(619) 394-6121	iPhone 12	\$26.25
	ID: 202304031107598281, Balance: \$314.99, Installment 13 of 24	

SERVICES \$36.27

ONE PLAN FEATURES

(213) 435-2730	ONE Plus	\$10.00
(213) 435-2747	ONE Plus	\$10.00

YOU SAVED

TOTAL \$36.99

AutoPay discounts \$30.00
\$5 discount per line for applicable lines on your account

Subscription discounts \$6.99
Discounts on subscription services through T-Mobile

YOU USED

1101.98^{GB}
of unlimited data
with ONE Plan

T-Mobile Internet 1067.34^{GB}

(213) 435-2730 23.29^{GB}

(213) 435-2747 8.97^{GB}

(619) 964-1068 2.25^{GB}

(619) 394-6121 0.13^{GB}

(619) 838-4493 0.00^{GB}



T-MOBILE SUBSCRIPTION

Your subscriptions automatically renew until you cancel. Cancel anytime. To manage, visit t-mo.co/managesubs

Account	Netflix Premium - T-Mobile Offer	\$16.00
	Includes \$6.99 Family Discount	

TAXES & FEES

T-Mobile fees & charges	\$0.27
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TAXES & FEES BREAKDOWN

Below are your T-Mobile fees & charges and your government taxes & fees

The taxes & fees below were summarized as line items above or included in your monthly charges. Here is the breakdown of the individual charges.

INCLUDED TAXES & FEES

1705 PETAL DR, San Diego CA 92114-6935	
ONE Plan Military - before taxes & fees	\$78.50
Included T-Mobile fees & charges	
Regulatory Fee	\$0.01
Included Government taxes & fees	
State 988	\$0.08
State 911	\$0.30
CA PPP Surcharge	\$1.11

ADDITIONAL T-MOBILE FEES & CHARGES

SERVICES		\$0.27
1705 PETAL DR, San Diego CA 92114-6935		
Account	Regulatory Fee	\$0.04
Account	Federal Universal Service Fund	\$0.23

2083 minutes of talk & 613 messages.

But no worries, it's all unlimited with ONE Plan!

Please see important unlimited plan details below



W. AT YOU f EED TO Kf OW

S8CPlan recurring charges include akklicable x onern! ent taves U fees U 400 obile fees U charges as deter! ined by your kri! ary klace of use.

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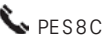
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Viev your bill U usage details online by logging into your account at tG obile.co! .

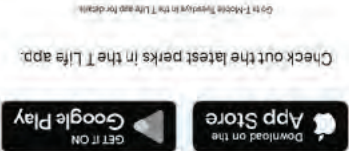
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7. Af 9E OF ADDI ESS	Effectine date
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Eo! e khone	Business khone

CESAR GARCIA
1705 PETAL DR
SAN DIEGO CA 92114-6935



Free stuff & exclusive perks
Great deals on food, gas, entertainment and more—just for being a customer.



Keep more of your money.

Join in minutes, and say goodbye to account fees.

Get started at t-mobilemoney.com

T Mobile
MONEY

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by Customers Bank
Member FDIC



Please detach this portion and return with your payment. Please make sure address shows through window.

Pay by phone: *PAY(*729) Pay online: t-mobile.com/pay

T-MOBILE
PO BOX 742596
CINCINNATI OH 45274-2596

Total due by May 09, 2024

\$222.52

Amount enclosed

You are paying by AutoPay

CESAR GARCIA
Account number: 963537851

☐ Change your address - Check box and provide new address on reverse side

0409635378510509240000222521921146935

Dear Counsel,

The Office of the United States Trustee has reviewed the underlying Petition, Schedules and Statement of Financial Affairs. Pursuant to 28 U.S.C. § 586(a)(3)(D), the United States Trustee supervises the administration of bankruptcy cases and, when appropriate, takes such action as the United States Trustee deems appropriate to ensure that all schedules, statements, reports and fees required under Title 11 are properly and timely filed. The United States Trustee is also charged with the responsibility to prosecute motions to dismiss pursuant to 11 U.S.C. § 707.

In order to verify the information provided in the petition, schedules and form 22A, please provide an explanation and additional information and documentation to this office **on or before May 20, 2024**.

1. Please provide the United States Trustee with copies of:
 - a. Most recently filed State and Federal Tax Returns;
 - b. W-2, W-2G and 1099 statements for 2023;
 - c. All pay advices or other proof of income (*full and part time*), including rental, commission and residual statements, SAG, AFTRA and WGA quarterly reports, cash disbursement journals and payroll ledgers and EDD, disability, retirement, pension, child support, trust funds, governmental assistance, **for all members of the Debtor's household**, for the entire period, covering **September 1, 2023 through the date of this letter**;
 - d. Current residential loan/lease agreements and monthly statements in which Debtors are a party for the entire monthly periods covering **September 1, 2023** through the date of this letter;
 - e. Current Vehicle Insurance declarations page and monthly statements, covering **September 1, 2023** through the date of this letter, for all vehicles;
 - f. Monthly bills for the entire period covering **September 1, 2023** through the date of this letter. Please include the bills for:

- i. Childcare and children's education costs (line 8 on Schedule J);
- ii. Medical and dental expenses (Line 11 on Schedule J);
- iii. Transportation (Line 12 on Schedule J);
- iv. Extracurricular activities (Line 21 on Schedule J);
- v. Phone (Line 6c on Schedule J);
- g. A recent copy of Debtor's credit report. Debtors can obtain a free credit report by visiting <https://www.annualcreditreport.com/index.action> or by calling toll-free, 1-877-322-8228.

Your response should also address any special circumstances or issues that are not readily apparent from the Schedules and Statement of Financial Affairs. It is important for the United States Trustee to have a complete understanding of the Debtor's financial picture in order to properly evaluate this case.

Please note this production of documents does not waive your obligation to provide the Chapter 7 trustee with the documents required pursuant to 11 U.S.C. § 521(e)(2).

Please direct your response to this letter to Marlene Fouche, Bankruptcy Auditor, **Via Email only - Reply All**, with a copy to the Chapter 7 Trustee. Responses via zip drives, zip files/folders need to be unlocked/password transmitted. Email submissions are to be no larger than **10mbs**. *Omit complete account numbers, **leaving only the last 4 digits** as disclosed on all documents submitted in response to this letter.*

Be advised that if this office does not receive the requested information **on or before May 20, 2024**, the United States Trustee will file a motion with the court requesting that this case be dismissed. If you have any additional questions regarding this letter, please contact Marlene Fouche at Marlene.Fouche@usdoj.gov.

Thank you, for your cooperation.

Marlene Fouche, Auditor

Office of the United States Trustee

Region 16 - Los Angeles

915 West Wilshire Blvd

Suite 1850

Los Angeles, CA 90017

(213) 894-6811 / 894-2603 (f)

--

Benjamin Heston, Esq.
NEXUS BANKRUPTCY

--

Benjamin Heston, Esq.
NEXUS BANKRUPTCY

--

Benjamin Heston, Esq.
NEXUS BANKRUPTCY

[Back](#)

\$23.91

O'Reilly Auto Parts, National City, CA
10/15/23, 1:06 PM

Status: Cleared

Apple Card

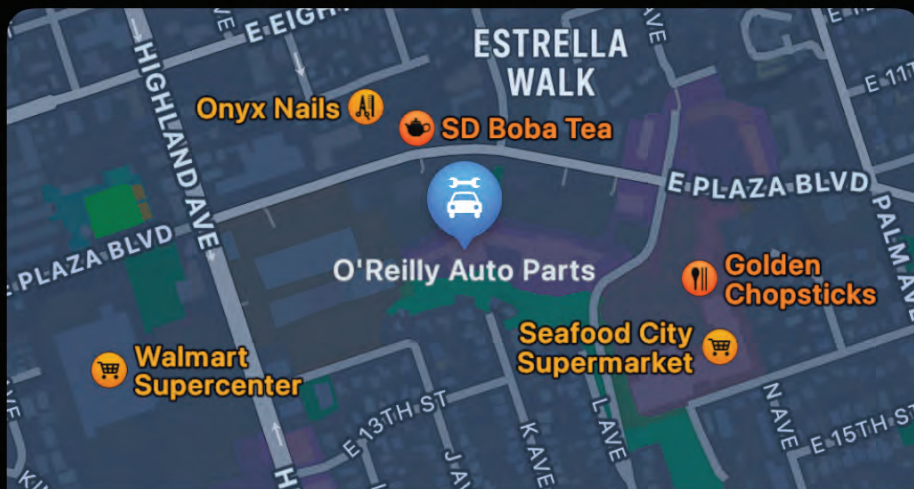
.... 3035

Total	\$23.91
--------------	----------------

2% Daily Cash	\$0.48
---------------	--------

SHOWN ON STATEMENT AS:

o'reilly 3186



O'Reilly Auto Parts



[Report an Issue](#)

[Back](#)

\$21.89

O'Reilly Auto Parts, Los Angeles, CA

9/13/23, 3:11 PM

Status: Cleared

Apple Card

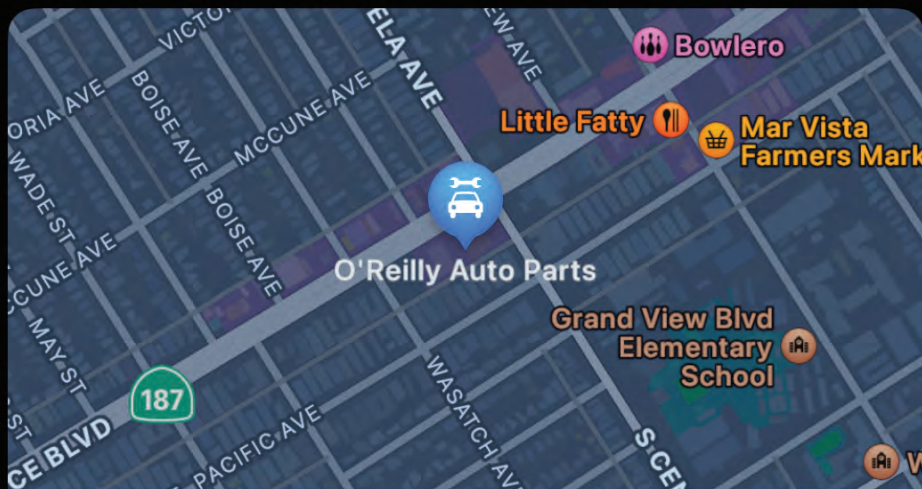
.... 3035

Total	\$21.89
--------------	----------------

2% Daily Cash	\$0.44
---------------	--------

SHOWN ON STATEMENT AS:

o'reilly auto parts 30



O'Reilly Auto Parts



[Report an Issue](#)

[Back](#)

\$323.01

O'Reilly Auto Parts, Los Angeles, CA
9/13/23, 3:07 PM

Status: Cleared

Apple Card

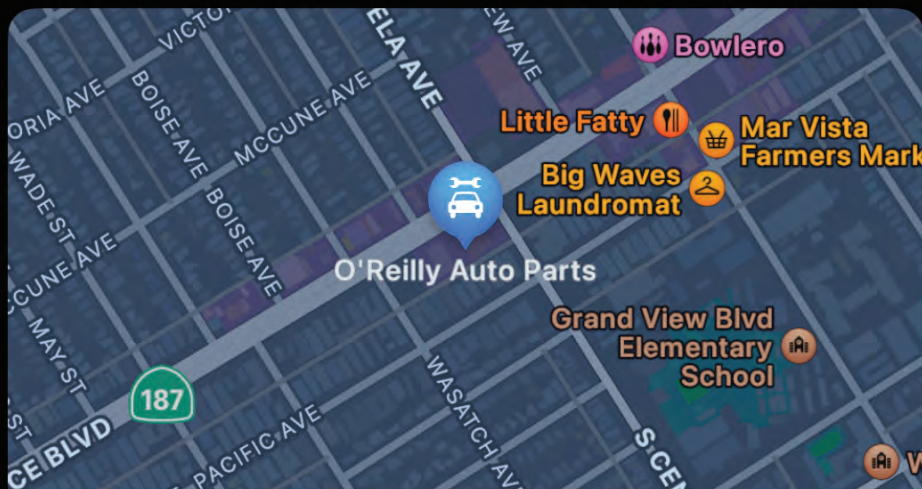
.... 3035

Total **\$323.01**

2% Daily Cash **\$6.46**

SHOWN ON STATEMENT AS:

o'reilly auto parts 30



O'Reilly Auto Parts



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[Back](#)

\$83.01

O'Reilly Auto Parts, Inglewood, CA
2/4/23, 12:25 PM

Status: Cleared

Apple Card

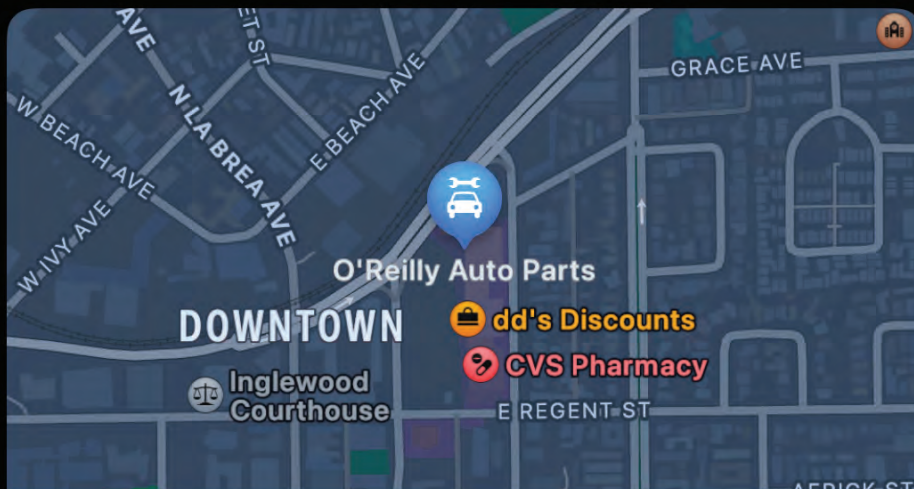
.... 3035

Total	\$83.01
--------------	----------------

2% Daily Cash	\$1.66
---------------	--------

SHOWN ON STATEMENT AS:

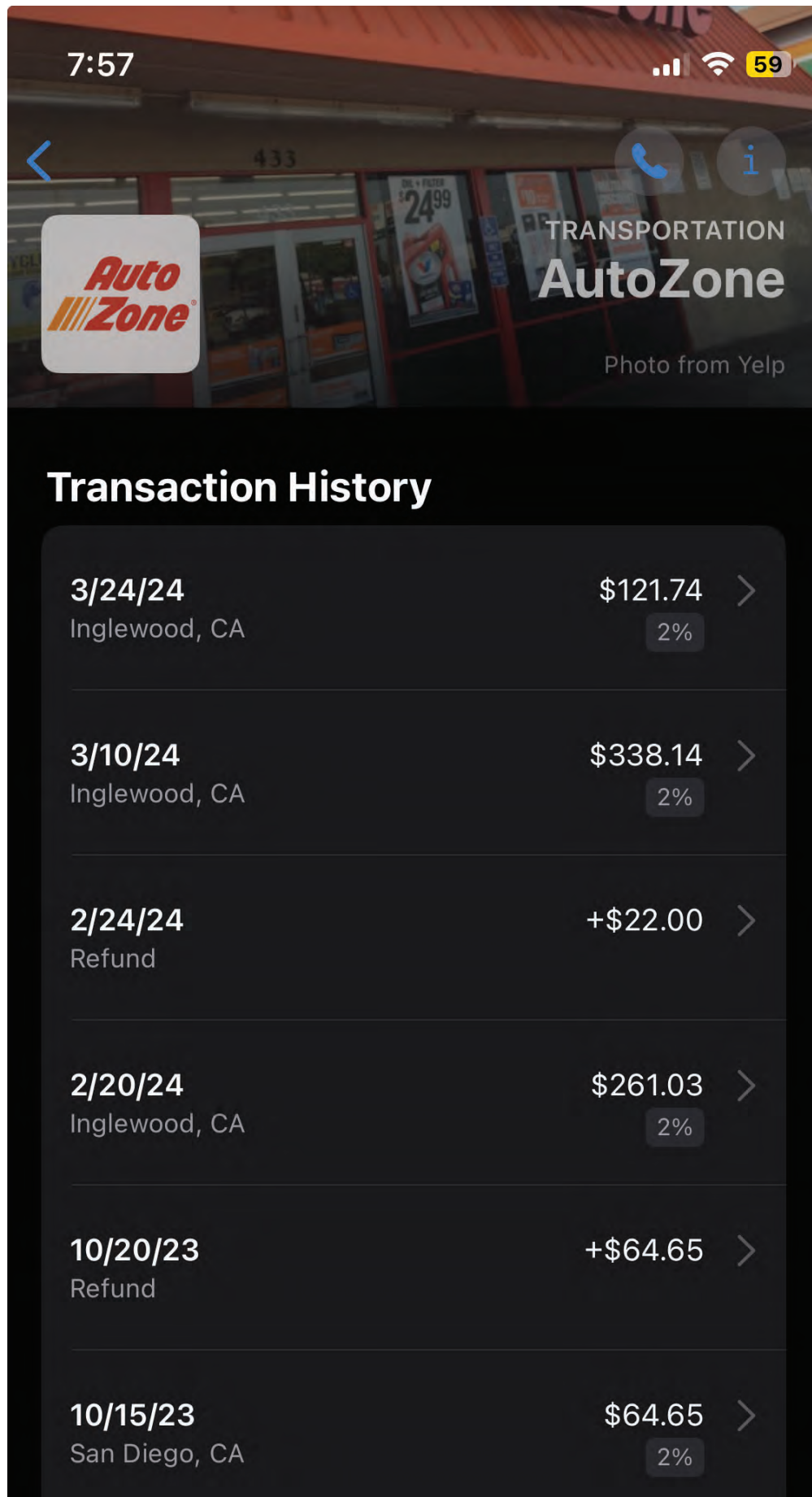
o'reilly auto parts 30



O'Reilly Auto Parts



[Report an Issue](#)



\$16

les, CA

Patient Treatment Case Report

Patient: Villacorta, Gladys
Provider: Nicole Guirguis, DDS
Phone: (310)578-5000
Office: 4292 Lincoln Blvd
Marina Del Rey, CA 90292

Date: 10/10/2023
Chart #: V10112
Birthdate: 9/4/1985

Case Name: Treatment Plan Priority: None Finance Status: None

Alternate Cases:

Status: Created Last Updated: 10/6/2023

Comment: Case created as a result of newly added procedure

Case Note:

Ent Date	Prc Date	Visit	Tooth	Surface	Code	Prov	Description	Fee	Pat	Prim Ins	Sec Ins	UCR
10/10/23	10/10/23	1	7		D2754	DD16	Zarconia Crown	1,000.00	1,000.00	0.00	0.00	1,800.00
10/10/23	10/10/23	1	7		D2950	DD16	Core buildup, include any pins	300.00	300.00	0.00	0.00	400.00
10/10/23	10/10/23	1	7		D3310	DD16	Endodontic therapy - anterior	237.60	0.00	237.60	0.00	1,350.00
Visit: 1 Subtotal:								1,537.60	1,300.00	237.60	0.00	3,550.00
10/06/23	10/06/23	2	UP		D9944	DD16	Occlusal Guard Hard Appliance	350.00	350.00	0.00	0.00	1,000.00
Visit: 2 Subtotal:								350.00	350.00	0.00	0.00	1,000.00
Total:								1,887.60	1,650.00	237.60	0.00	4,550.00

Treatment Plan Total	1,887.60
Estimated Deductible to be Applied	0.00
Estimated Insurance Payment	237.60
Estimated Patient's Portion	1,650.00

Dental Insurance Benefits		Patient	
		Primary	Secondary
Annual Plan Benefits		0.00	0.00
Paid Benefits YTD		0.00	0.00
Pending Insurance Est. YTD		50.60	0.00
Est. Benefits Remaining YTD		0.00	0.00
Benefits Expire		12/31/2023	NA
Deductible Owed YTD	Standard	0.00	0.00
	Preventive	0.00	0.00
	Other	0.00	0.00
Primary Dental Insurance	Liberty Dental Plan of Ca.		
Secondary Dental Insurance			

EXHIBIT 6

From: [Fouche, Marlene \(USTP\)](#)
To: [Ben Heston](#)
Cc: [Madoyan, Noreen \(USTP\)](#)
Subject: RE: [EXTERNAL] Re: VILLACORTA, GLADYS GRACE LIAD 24-13211-DS Response due 06/04
Date: Wednesday, May 29, 2024 8:31:00 AM
Attachments: [image001.png](#)

My apologies, yes, I used a household size of 3.

From: Ben Heston <ben@nexusbk.com>
Sent: Wednesday, May 29, 2024 8:28 AM
To: Fouche, Marlene (USTP) <Marlene.Fouche@usdoj.gov>
Cc: Madoyan, Noreen (USTP) <Noreen.Madoyan@usdoj.gov>
Subject: [EXTERNAL] Re: VILLACORTA, GLADYS GRACE LIAD 24-13211-DS Response due 06/04

Good morning,

Just to clarify, you used a household size of three, right? Your email says 2, but I think we're in agreement on the standardized expenses.

On Wed, May 29, 2024 at 8:03 AM Fouche, Marlene (USTP) <Marlene.Fouche@usdoj.gov> wrote:

Dear Counsel,

After careful review of the petition, schedules, and pay advices, the U.S. Trustee has determined that the presumption of abuse arises under § 707(b)(2) in this case. The U.S. Trustee's calculations were derived from the information provided in the debtor's schedules as well as the documents provided in response to the U.S. Trustee's inquiry. The U.S. Trustee's calculations use the household size of two.

Below is a side-by-side analysis of the debtor's means test compared to the U.S. Trustee's means test:

INCOME	Debtor	UST	
FORM 122A-1 LINE 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). DEBTOR#1	\$3,798.08	\$4,230.78	
FORM 122A-1 LINE 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). DEBTOR#2/NFS	\$5,455.87	\$5,911.64	
FORM 122A-1 LINE 11. Total Current Monthly Income	\$9,253.95	\$10,142.41	
FORM 122A-1 LINE 12b. Total Current ANNUAL Income	\$111,047.40	\$121,708.96	
ADJUSTMENTS TO INCOME	ABOVE	ABOVE	
EXPENSES			
FORM 122A-2 LINE 6 Food, Clothing and Other Items	\$1,700.00	\$1,700.00	
FORM 122A-2 LINE 7c Out of Pocket Health Care Allowance	\$237.00	\$237.00	
FORM 122A-2 LINE 8 Housing and Utilities - Insurance & Operating Expenses	\$799.00	\$799.00	
FORM 122A-2 LINE 9 Housing and Utilities - Mortgage or Rent Expenses	\$2,687.00	\$2,687.00	
FORM 122A-2 LINE 12 Vehicle operation expense	\$678.00	\$678.00	
FORM 122A-2 LINE 13a. Ownership or leasing costs using IRS Local Standard	\$0.00	\$0.00	
FORM 122A-2 LINE 16 Taxes	\$1,778.56	\$1,865.60	
FORM 122A-2 LINE 18 Life Insurance	\$33.17	\$28.22	
FORM 122A-2 LINE 21 Childcare	\$350.00	\$350.00	
FORM 122A-2 LINE 22 Additional Healthcare	\$400.00	\$163.00	
FORM 122A-2 LINE 23 Optional Phone Services	\$200.00		No justification - Monthly phone bill \$222.52
FORM 122A-2 LINE 25			
Health Insurance	\$321.38	\$334.96	
Disability Insurance	\$91.20	\$7.68	
Health Savings Account	\$80.78	\$87.19	
FORM 122A-2 LINE 30 Additional Food & Clothing	\$57.00		No justification
FORM 122A-2 LINE 36 Chapter 13 Admin expenses		\$120.48	Per Means Test calculations based on the aggregate of adjustments above
FORM 122A-2 LINE 39b Total deductions	\$9,413.09	\$9,058.12	
FORM 122A-2 LINE 39c Monthly Disposable Income per 707(b)(2)	(\$159.14)	\$1,084.30	
FORM 122A-2 LINE 39d TOTAL (multiply line 39c by 60)	(\$9,548.40)	\$65,057.85	
FORM 122A-2 LINE 41a TOTAL NONPRIORITY UNSECURED DEBT		\$ 43,168.00	
% REPAYMENT OVER 60 MONTHS		151%	

The net result is that the debtor has an excess monthly income of \$1,084.30. This will allow for the repayment of 100% of the Schedule E/F debt (\$43,168) over a 60-month period. Therefore, dismissal is warranted under both §§ 707(b)(2) and (b)(3).

Please let me know if you would like to stipulate to dismiss this case or convert to a Chapter 13 in lieu of our office taking formal action. **A response by 06/04/2024 is requested.**

Kindly,

Marlene Fouche
Bankruptcy Auditor

--

Benjamin Heston, Esq.
NEXUS BANKRUPTCY

EXHIBIT 7

From: [Ben Heston](#)
To: [Fouche, Marlene \(USTP\)](#)
Cc: [Madoyan, Noreen \(USTP\)](#)
Subject: Re: [EXTERNAL] Re: VILLACORTA, GLADYS GRACE LIAD 24-13211-DS Response due 06/04
Date: Wednesday, June 5, 2024 7:42:18 AM
Attachments: [image001.png](#)

Good morning,

Yes, and sorry I didn't get back to you yesterday. I got a migraine that just completely wiped me out for the day. In the next day or two I will be filing an amended Means Test which will show that there is a presumption of abuse. I will be also filing a declaration to try and rebut the presumption. After speaking with my client and her husband, it seems that their expenses are already cut back as much as reasonably possible and they do not have any disposable income with which they could make a Chapter 13 payment. Additionally, they will need to be purchasing new vehicles within the coming months and are estimating that these payments will be approximately \$400 and \$500 dollars per month. My kids are getting out of school early today, so I will not be able to get that filed until tomorrow at the earliest.

On Wed, Jun 5, 2024 at 7:31 AM Fouche, Marlene (USTP) <Marlene.Fouche@usdoj.gov> wrote:

Dear Counsel,

Do you have an update on the response to the UST inquiry?

Regards,

Marlene

From: Ben Heston <ben@nexusbk.com>
Sent: Wednesday, May 29, 2024 9:49 AM
To: Fouche, Marlene (USTP) <Marlene.Fouche@usdoj.gov>
Cc: Madoyan, Noreen (USTP) <Noreen.Madoyan@usdoj.gov>
Subject: Re: [EXTERNAL] Re: VILLACORTA, GLADYS GRACE LIAD 24-13211-DS Response due 06/04

Got it. I will review this with my client and get back to you ASAP. Are appearances required for the hearing tomorrow?

On Wed, May 29, 2024 at 8:31 AM Fouche, Marlene (USTP) <Marlene.Fouche@usdoj.gov> wrote:

My apologies, yes, I used a household size of 3.

From: Ben Heston <ben@nexusbk.com>
Sent: Wednesday, May 29, 2024 8:28 AM
To: Fouche, Marlene (USTP) <Marlene.Fouche@usdoj.gov>
Cc: Madoyan, Noreen (USTP) <Noreen.Madoyan@usdoj.gov>
Subject: [EXTERNAL] Re: VILLACORTA, GLADYS GRACE LIAD 24-13211-DS Response due 06/04

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Below is a side-by-side analysis of the debtor's means test compared to the U.S. Trustee's means test:

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FORM 122A-2 LINE 8 Housing and Utilities - Insurance & Operating Expenses	\$799.00	\$799.00	
FORM 122A-2 LINE 9 Housing and Utilities - Mortgage or Rent Expenses	\$2,687.00	\$2,687.00	
FORM 122A-2 LINE 12 Vehicle operation expense	\$678.00	\$678.00	
FORM 122A-2 LINE 13a. Ownership or leasing costs using IRS Local Standard	\$0.00	\$0.00	
FORM 122A-2 LINE 16 Taxes	\$1,778.56	\$1,865.60	
FORM 122A-2 LINE 18 Life Insurance	\$33.17	\$28.22	
FORM 122A-2 LINE 21 Childcare	\$350.00	\$350.00	
FORM 122A-2 LINE 22 Additional Healthcare	\$400.00	\$163.00	
FORM 122A-2 LINE 23 Optional Phone Services	\$200.00		No justification - Monthly phone bill \$222.52
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Health Savings Account	\$80.78	\$87.19	
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FORM 122A-2 LINE 36 Chapter 13 Admin expenses		\$120.48	Per Means Test calculations based on the aggregate of adjustments above
FORM 122A-2 LINE 39b Total deductions	\$9,413.09	\$9,058.12	
FORM 122A-2 LINE 39c Monthly Disposable Income per 707(b)(2)	(\$159.14)	\$1,084.30	
FORM 122A-2 LINE 39d TOTAL (multiply line 39c by 60)	(\$9,548.40)	\$65,057.85	
FORM 122A-2 LINE 41a TOTAL NONPRIORITY UNSECURED DEBT		\$ 43,168.00	
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The net result is that the debtor has an **excess monthly income of \$1,084.30**. This will allow for the **repayment of 100% of the Schedule E/F debt** (\$43,168) over a 60-month period. Therefore, dismissal is warranted under both §§ 707(b)(2) and (b)(3).

Please let me know if you would like to stipulate to dismiss this case or convert to a Chapter 13 in lieu of our office taking formal action. **A response by 06/04/2024 is requested.**

Kindly,

Marlene Fouche

Bankruptcy Auditor

--

Benjamin Heston, Esq.
NEXUS BANKRUPTCY

EXHIBIT 8



BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Period Beginning: 03/25/2024
Period Ending: 04/07/2024
Pay Date: 04/12/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
5421 THORNBURN STREET
LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	23,076.96
Gross Pay			\$2,884.62	22,788.50

Other Benefits and Information	this period	total to date
Totl Hrs Worked	80.00	

Deductions	Statutory	
Federal Income Tax	-296.38	2,332.02
Social Security Tax	-171.96	1,364.68
Medicare Tax	-40.22	319.16
CA State Income Tax	-121.90	959.59
CA SDI Tax	-30.51	242.12
Other		
Med 125 Ded	-111.08*	777.56
Net Pay	\$2,112.57	
Chkck1	-2,112.57	
Net Check	\$0.00	

Important Notes

EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information

Taxable Marital Status:

CA: Single

Exemptions/Allowances:

CA: 0

* Excluded from federal taxable wages

Your federal taxable wages this period are
\$2,773.54

Your CA taxable wages this period are
\$2,773.54

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BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Advice number: 00000150039
Pay date: 04/12/2024

Deposited to the account of	account number	transit ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx xxxx	\$2,112.57

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Period Beginning: 03/11/2024
Period Ending: 03/24/2024
Pay Date: 03/29/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
5421 THORNBURN STREET
LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	20,192.34
Gross Pay			\$2,884.62	19,903.88

Other Benefits and Information	this period	total to date
Totl Hrs Worked	80.00	

Deductions	Statutory		
	Federal Income Tax	-296.38	2,035.64
	Social Security Tax	-171.96	1,192.72
	Medicare Tax	-40.21	278.94
	CA State Income Tax	-121.90	837.69
	CA SDI Tax	-30.51	211.61
	Other		
	Med 125 Ded	-111.08*	666.48
	Net Pay	\$2,112.58	
	Chkck1	-2,112.58	
	Net Check	\$0.00	

Important Notes

EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information

Taxable Marital Status:

CA: Single

Exemptions/Allowances:

CA: 0

* Excluded from federal taxable wages

Your federal taxable wages this period are
\$2,773.54

Your CA taxable wages this period are
\$2,773.54

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BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Advice number: 00000130039
Pay date: 03/29/2024

Deposited to the account of	account number	transit ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx xxxx	\$2,112.58

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Period Beginning: 02/26/2024
Period Ending: 03/10/2024
Pay Date: 03/15/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
5421 THORNBURN STREET
LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	17,307.72
Gross Pay			\$2,884.62	17,019.26

Other Benefits and Information	this period	total to date
Totl Hrs Worked	80.00	

Deductions	Statutory		
	Federal Income Tax	-296.38	1,739.26
	Social Security Tax	-171.96	1,020.76
	Medicare Tax	-40.22	238.73
	CA State Income Tax	-121.90	715.79
	CA SDI Tax	-30.51	181.10
	Other		
	Med 125 Ded	-111.08*	555.40
	Net Pay	\$2,112.57	
	Chkck1	-2,112.57	
	Net Check	\$0.00	

Important Notes

EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information

Taxable Marital Status:

CA: Single

Exemptions/Allowances:

CA: 0

* Excluded from federal taxable wages

Your federal taxable wages this period are
\$2,773.54

Your CA taxable wages this period are
\$2,773.54

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BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Advice number: 00000114038
Pay date: 03/15/2024

Deposited to the account of	account number	transit ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx xxxx	\$2,112.57

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
 2170 S TOWNE CENTRE PL SUITE 300
 ANAHEIM, CA 92806

Period Beginning: 02/12/2024
 Period Ending: 02/25/2024
 Pay Date: 03/01/2024

Filing Status: Single/Married filing separately
 Exemptions/Allowances:
 Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
 5421 THORNBURN STREET
 LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	14,423.10
Gross Pay			\$2,884.62	14,134.64

Other Benefits and Information	this period	total to date
Totl Hrs Worked	80.00	

Deductions	Statutory		
	Federal Income Tax	-296.38	1,442.88
	Social Security Tax	-171.96	848.80
	Medicare Tax	-40.22	198.51
	CA State Income Tax	-121.90	593.89
	CA SDI Tax	-30.51	150.59
	Other		
	Med 125 Ded	-111.08*	444.32
	Net Pay	\$2,112.57	
	Chkck1	-2,112.57	
	Net Check	\$0.00	

Important Notes
 EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information
 Taxable Marital Status:
 CA: Single
 Exemptions/Allowances:
 CA: 0

*** Excluded from federal taxable wages**

Your federal taxable wages this period are
 \$2,773.54
 Your CA taxable wages this period are
 \$2,773.54

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BAY DESIGN GROUP LLC
 2170 S TOWNE CENTRE PL SUITE 300
 ANAHEIM, CA 92806

Advice number: 00000090038
 Pay date: 03/01/2024

Deposited to the account of	account number	transit ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx xxxx	\$2,112.57

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Period Beginning: 01/29/2024
Period Ending: 02/11/2024
Pay Date: 02/16/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
5421 THORNBURN STREET
LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	11,538.48
Gross Pay			\$2,884.62	11,250.02

Other Benefits and Information	this period	total to date
Totl Hrs Worked	80.00	

Deductions	Statutory		
	Federal Income Tax	-296.38	1,146.50
	Social Security Tax	-171.96	676.84
	Medicare Tax	-40.21	158.29
	CA State Income Tax	-121.90	471.99
	CA SDI Tax	-30.50	120.08
	Other		
	Med 125 Ded	-111.08*	333.24
	Net Pay	\$2,112.59	
	Chkck1	-2,112.59	
	Net Check	\$0.00	

Important Notes

EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information

Taxable Marital Status:

CA: Single

Exemptions/Allowances:

CA: 0

* Excluded from federal taxable wages

Your federal taxable wages this period are
\$2,773.54

Your CA taxable wages this period are
\$2,773.54

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BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Advice number: 00000070036
Pay date: 02/16/2024

Deposited to the account of	account number	transit ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx xxxx	\$2,112.59

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Period Beginning: 01/15/2024
Period Ending: 01/28/2024
Pay Date: 02/02/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
5421 THORNBURN STREET
LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	8,653.86
Gross Pay			\$2,884.62	8,365.40

Other Benefits and Information	this period	total to date
Totl Hrs Worked	80.00	

Deductions	Statutory		
	Federal Income Tax	-296.38	850.12
	Social Security Tax	-171.96	504.88
	Medicare Tax	-40.22	118.08
	CA State Income Tax	-121.90	350.09
	CA SDI Tax	-30.51	89.58
	Other		
	Med 125 Ded	-111.08*	222.16
	Net Pay	\$2,112.57	
	Chkck1	-2,112.57	
	Net Check	\$0.00	

Important Notes

EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information

Taxable Marital Status:

CA: Single

Exemptions/Allowances:

CA: 0

* Excluded from federal taxable wages

Your federal taxable wages this period are
\$2,773.54

Your CA taxable wages this period are
\$2,773.54

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BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Advice number: 00000050037
Pay date: 02/02/2024

Deposited to the account of	account number	transit ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx xxxx	\$2,112.57

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Period Beginning: 01/01/2024
Period Ending: 01/14/2024
Pay Date: 01/19/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
5421 THORNBURN STREET
LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	5,769.24
Gross Pay			\$2,884.62	5,480.78

Other Benefits and Information	this period	total to date
Totl Hrs Worked	80.00	

Deductions	Statutory		
	Federal Income Tax	-296.38	553.74
	Social Security Tax	-171.96	332.92
	Medicare Tax	-40.22	77.86
	CA State Income Tax	-121.90	228.19
	CA SDI Tax	-30.51	59.07
	Other		
	Med 125 Ded	-111.08*	111.08
	Net Pay	\$2,112.57	
	Chkck1	-2,112.57	
	Net Check	\$0.00	

Important Notes

EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information

Taxable Marital Status:

CA: Single

Exemptions/Allowances:

CA: 0

* Excluded from federal taxable wages

Your federal taxable wages this period are
\$2,773.54

Your CA taxable wages this period are
\$2,773.54

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BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Advice number: 00000030038
Pay date: 01/19/2024

Deposited to the account of	account number	transit	ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx	xxxx	\$2,112.57

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
 2170 S TOWNE CENTRE PL SUITE 300
 ANAHEIM, CA 92806

Period Beginning: 12/18/2023
 Period Ending: 12/31/2023
 Pay Date: 01/05/2024

Filing Status: Single/Married filing separately
 Exemptions/Allowances:
 Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
 5421 THORNBURN STREET
 LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	2,884.62
Unpaid Time		8.00	-288.46	
Gross Pay			\$2,596.16	2,596.16

Other Benefits and Information	this period	total to date
Sic	7.98	
Vac Available	9.24	
Totl Hrs Worked	80.00	

Deductions	Statutory	
Federal Income Tax	-257.36	257.36
Social Security Tax	-160.96	160.96
Medicare Tax	-37.64	37.64
CA State Income Tax	-106.29	106.29
CA SDI Tax	-28.56	28.56
Net Pay	\$2,005.35	
Chkck1	-2,005.35	
Net Check	\$0.00	

Important Notes
 EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information
 Taxable Marital Status:
 CA: Single
 Exemptions/Allowances:
 CA: 0

Your federal taxable wages this period are
 \$2,596.16
 Your CA taxable wages this period are
 \$2,596.16

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BAY DESIGN GROUP LLC
 2170 S TOWNE CENTRE PL SUITE 300
 ANAHEIM, CA 92806

Advice number: 00000010037
 Pay date: 01/05/2024

Deposited to the account of	account number	transit ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx xxxx	\$2,005.35

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Period Beginning: 12/04/2023
Period Ending: 12/17/2023
Pay Date: 12/22/2023

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
5421 THORNBURN STREET
LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	5,769.24
Unpaid Time		8.00	-288.46	
Gross Pay			\$2,596.16	5,480.78

Other Benefits and Information	this period	total to date
Sic	5.32	
Vac Available	6.16	
Totl Hrs Worked	80.00	

Deductions	Statutory		
Federal Income Tax	-273.48	610.42	
Social Security Tax	-160.96	339.81	
Medicare Tax	-37.64	79.47	
CA State Income Tax	-109.96	247.24	
CA SDI Tax	-23.37	49.33	
Net Pay	\$1,990.75		
Chkck1	-1,990.75		
Net Check	\$0.00		

Important Notes
EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information
Taxable Marital Status:
CA: Single
Exemptions/Allowances:
CA: 0

Your federal taxable wages this period are
\$2,596.16
Your CA taxable wages this period are
\$2,596.16

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BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Advice number: 00000514037
Pay date: 12/22/2023

Deposited to the account of	account number	transit ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx xxxx	\$1,990.75

THIS IS NOT A CHECK

NON-NEGOTIABLE



BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Period Beginning: 11/20/2023
Period Ending: 12/03/2023
Pay Date: 12/08/2023

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

GLADYS GRACE VILLACORTA
5421 THORNBURN STREET
LOS ANGELES CA 90045

Social Security Number: XXX-XX-5024

Earnings	rate	salary/hours	this period	year to date
Regular	2884.62	80.00	2,884.62	2,884.62
Gross Pay			\$2,884.62	2,884.62

Other Benefits and Information	this period	total to date
Sic	2.66	
Vac Available	3.08	
Totl Hrs Worked	80.00	

Deductions	Statutory		
Federal Income Tax	-336.94	336.94	
Social Security Tax	-178.85	178.85	
Medicare Tax	-41.83	41.83	
CA State Income Tax	-137.28	137.28	
CA SDI Tax	-25.96	25.96	
Net Pay	\$2,163.76		
Chkck1	-2,163.76		
Net Check	\$0.00		

Important Notes
EMPLOYER BUSINESS PH#212-287-4350

BASIS OF PAY: SALARY

Additional Tax Withholding Information
Taxable Marital Status:
CA: Single
Exemptions/Allowances:
CA: 0

Your federal taxable wages this period are
\$2,884.62
Your CA taxable wages this period are
\$2,884.62

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BAY DESIGN GROUP LLC
2170 S TOWNE CENTRE PL SUITE 300
ANAHEIM, CA 92806

Advice number: 00000490038
Pay date: 12/08/2023

Deposited to the account of	account number	transit ABA	amount
GLADYS GRACE VILLACORTA	xxxxxx3359	xxxx xxxx	\$2,163.76

THIS IS NOT A CHECK

NON-NEGOTIABLE



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement	
Period Start Date	03/24/2024
Period End Date	04/06/2024
Pay Date	04/12/2024
Document	5651905
Net Pay	\$2,045.64

Pay Details

CALVIN ALFILER GARCIA 5421 Thornburn St Los Angeles, CA 90045 USA	Employee Number	261643	Pay Group	US HT SALARY
	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$820.38
HOLIDAY			0.0000	\$0.0000	\$0.00	\$820.38
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$601.09
SALARY	03/25/2024	03/25/2024	8.0000	\$34.1827	\$273.46	
SALARY	03/26/2024	03/26/2024	8.0000	\$34.1827	\$273.46	
SALARY	03/27/2024	03/27/2024	8.0000	\$34.1827	\$273.46	
SALARY	03/28/2024	03/28/2024	8.0000	\$34.1827	\$273.46	
SALARY	03/29/2024	03/29/2024	8.0000	\$34.1827	\$273.46	
SALARY	04/01/2024	04/01/2024	8.0000	\$34.1827	\$273.46	
SALARY	04/02/2024	04/02/2024	8.0000	\$34.1827	\$273.46	
SALARY	04/03/2024	04/03/2024	8.0000	\$34.1827	\$273.46	
SALARY	04/04/2024	04/04/2024	8.0000	\$34.1827	\$273.46	
SALARY	04/05/2024	04/05/2024	8.0000	\$34.1827	\$273.46	\$20,236.04
Total Hours Worked 0.0000			Total Hours 80.0000			

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$42.31	\$338.48	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$150.00)	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$83.31	\$666.48	\$185.82	\$1,486.56
LTD BUY UP EE	No	\$3.56	\$28.48	—	—
PPO (DEN) PREM	Yes	\$35.26	\$282.08	\$13.67	\$109.36
SUPL LIFE CHILD	No	\$0.92	\$7.36	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$94.80	\$0.00	\$0.00
SUPL LIFE SPOUS	No	\$0.54	\$4.32	\$0.00	\$0.00
VISION PREMIUM	Yes	\$10.28	\$82.24	\$0.01	\$0.08
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.08
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$13.12

Taxes

Tax	Current	YTD
Federal Income Tax	\$173.23	\$1,292.68
Employee Medicare	\$37.17	\$306.07
Social Security Employee Tax	\$158.93	\$1,308.73
CA State Income Tax	\$103.41	\$602.57
CA Disability Employee	\$28.19	\$232.19

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	178.1539
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,045.64
Total		\$2,045.64

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,563.44	\$500.93	\$188.03	\$2,045.64
YTD	\$22,477.89	\$21,108.61	\$3,742.24	\$1,354.24	\$17,381.41



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement	
Period Start Date	02/25/2024
Period End Date	03/09/2024
Pay Date	03/15/2024
Document	5623838
Net Pay	\$2,095.63

Pay Details

CALVIN ALFILER GARCIA 5421 Thornburn St Los Angeles, CA 90045 USA	Employee Number	261643	Pay Group	US HT SALARY
	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$546.92
HOLIDAY			0.0000	\$0.0000	\$0.00	\$820.38
SALARY	02/26/2024	02/26/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/27/2024	02/27/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/28/2024	02/28/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/29/2024	02/29/2024	8.0000	\$34.1827	\$273.46	
SALARY	03/01/2024	03/01/2024	8.0000	\$34.1827	\$273.46	
SALARY	03/04/2024	03/04/2024	8.0000	\$34.1827	\$273.46	
SALARY	03/05/2024	03/05/2024	8.0000	\$34.1827	\$273.46	
SALARY	03/06/2024	03/06/2024	8.0000	\$34.1827	\$273.46	
SALARY	03/07/2024	03/07/2024	8.0000	\$34.1827	\$273.46	
SALARY	03/08/2024	03/08/2024	8.0000	\$34.1827	\$273.46	\$15,040.30
Total Hours Worked 0.0000			Total Hours 80.0000			

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$42.31	\$253.86	\$0.00	\$0.00
HOME OFC REIMB	No	(\$50.00)	(\$150.00)	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$83.31	\$499.86	\$185.82	\$1,114.92
LTD BUY UP EE	No	\$3.56	\$21.36	—	—
PPO (DEN) PREM	Yes	\$35.26	\$211.56	\$13.67	\$82.02
SUPL LIFE CHILD	No	\$0.92	\$5.52	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$71.10	\$0.00	\$0.00
SUPL LIFE SPOUS	No	\$0.54	\$3.24	\$0.00	\$0.00
VISION PREMIUM	Yes	\$10.28	\$61.68	\$0.01	\$0.06
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.06
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$9.84

Taxes

Tax	Current	YTD
Federal Income Tax	\$173.23	\$813.98
Employee Medicare	\$37.17	\$223.02
Social Security Employee Tax	\$158.93	\$953.60
CA State Income Tax	\$103.41	\$334.26
CA Disability Employee	\$28.20	\$169.19

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	176.9231
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,095.63
Total		\$2,095.63

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,563.44	\$500.94	\$138.03	\$2,095.63
YTD	\$16,407.60	\$15,380.64	\$2,494.05	\$978.18	\$12,935.37



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement	
Period Start Date	02/11/2024
Period End Date	02/24/2024
Pay Date	03/01/2024
Document	5614282
Net Pay	\$2,045.62

Pay Details

CALVIN ALFILER GARCIA 5421 Thornburn St Los Angeles, CA 90045 USA	Employee Number	261643	Pay Group	US HT SALARY
	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$546.92
HOLIDAY			0.0000	\$0.0000	\$0.00	\$820.38
SALARY	02/12/2024	02/12/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/13/2024	02/13/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/14/2024	02/14/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/15/2024	02/15/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/16/2024	02/16/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/19/2024	02/19/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/20/2024	02/20/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/21/2024	02/21/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/22/2024	02/22/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/23/2024	02/23/2024	8.0000	\$34.1827	\$273.46	\$12,305.70
Total Hours Worked 0.0000			Total Hours 80.0000			

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$42.31	\$211.55	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$100.00)	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$83.31	\$416.55	\$185.82	\$929.10
LTD BUY UP EE	No	\$3.56	\$17.80	—	—
PPO (DEN) PREM	Yes	\$35.26	\$176.30	\$13.67	\$68.35
SUPL LIFE CHILD	No	\$0.92	\$4.60	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$59.25	\$0.00	\$0.00
SUPL LIFE SPOUS	No	\$0.54	\$2.70	\$0.00	\$0.00
VISION PREMIUM	Yes	\$10.28	\$51.40	\$0.01	\$0.05
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.05
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$8.20

Taxes

Tax	Current	YTD
Federal Income Tax	\$173.23	\$640.75
Employee Medicare	\$37.17	\$185.85
Social Security Employee Tax	\$158.94	\$794.67
CA State Income Tax	\$103.41	\$230.85
CA Disability Employee	\$28.20	\$140.99

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	172.3077
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,045.62
Total		\$2,045.62

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,563.44	\$500.95	\$188.03	\$2,045.62
YTD	\$13,673.00	\$12,817.20	\$1,993.11	\$840.15	\$10,839.74



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement	
Period Start Date	01/28/2024
Period End Date	02/10/2024
Pay Date	02/16/2024
Document	5605189
Net Pay	\$2,223.53

Pay Details

CALVIN ALFILER GARCIA 5421 Thornburn St Los Angeles, CA 90045 USA	Employee Number	261643	Pay Group	US HT SALARY
	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$546.92
HOLIDAY			0.0000	\$0.0000	\$0.00	\$820.38
SALARY	01/29/2024	01/29/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/30/2024	01/30/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/31/2024	01/31/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/01/2024	02/01/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/02/2024	02/02/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/05/2024	02/05/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/06/2024	02/06/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/07/2024	02/07/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/08/2024	02/08/2024	8.0000	\$34.1827	\$273.46	
SALARY	02/09/2024	02/09/2024	8.0000	\$34.1827	\$273.46	\$9,571.10
Total Hours Worked 0.0000			Total Hours 80.0000			

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$42.31	\$169.24	\$0.00	\$0.00
HOME OFC REIMB	No	(\$50.00)	(\$100.00)	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$83.31	\$333.24	\$185.82	\$743.28
LTD BUY UP EE	No	\$3.56	\$14.24	—	—
PPO (DEN) PREM	Yes	\$35.26	\$141.04	\$13.67	\$54.68
SUPL LIFE CHILD	No	\$0.92	\$3.68	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$47.40	\$0.00	\$0.00
SUPL LIFE SPOUS	No	\$0.54	\$2.16	\$0.00	\$0.00
VISION PREMIUM	Yes	\$10.28	\$41.12	\$0.01	\$0.04
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.04
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$6.56

Taxes

Tax	Current	YTD
Federal Income Tax	\$116.88	\$467.52
Employee Medicare	\$37.17	\$148.68
Social Security Employee Tax	\$158.93	\$635.73
CA State Income Tax	\$31.86	\$127.44
CA Disability Employee	\$28.20	\$112.79

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	167.6923
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,223.53
Total		\$2,223.53

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,563.44	\$373.04	\$138.03	\$2,223.53
YTD	\$10,938.40	\$10,253.76	\$1,492.16	\$652.12	\$8,794.12



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement	
Period Start Date	01/14/2024
Period End Date	01/27/2024
Pay Date	02/02/2024
Document	5594969
Net Pay	\$2,173.54

Pay Details

CALVIN ALFILER GARCIA 5421 Thornburn St Los Angeles, CA 90045 USA	Employee Number	261643	Pay Group	US HT SALARY
	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$546.92
HOLIDAY	01/15/2024	01/15/2024	8.0000	\$34.1827	\$273.46	\$820.38
SALARY	01/16/2024	01/16/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/17/2024	01/17/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/18/2024	01/18/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/19/2024	01/19/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/22/2024	01/22/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/23/2024	01/23/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/24/2024	01/24/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/25/2024	01/25/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/26/2024	01/26/2024	8.0000	\$34.1827	\$273.46	\$6,836.50
Total Hours Worked 0.0000			Total Hours 80.0000			

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$42.31	\$126.93	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$50.00)	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$83.31	\$249.93	\$185.82	\$557.46
LTD BUY UP EE	No	\$3.56	\$10.68	—	—
PPO (DEN) PREM	Yes	\$35.26	\$105.78	\$13.67	\$41.01
SUPL LIFE CHILD	No	\$0.92	\$2.76	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$35.55	\$0.00	\$0.00
SUPL LIFE SPOUS	No	\$0.54	\$1.62	\$0.00	\$0.00
VISION PREMIUM	Yes	\$10.28	\$30.84	\$0.01	\$0.03
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.03
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$4.92

Taxes

Tax	Current	YTD
Federal Income Tax	\$116.88	\$350.64
Employee Medicare	\$37.17	\$111.51
Social Security Employee Tax	\$158.93	\$476.80
CA State Income Tax	\$31.86	\$95.58
CA Disability Employee	\$28.19	\$84.59

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	163.0769
Personal Time	0.0000	0.0000
Volunteer Plans	8.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,173.54
Total		\$2,173.54

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,563.44	\$373.03	\$188.03	\$2,173.54
YTD	\$8,203.80	\$7,690.32	\$1,119.12	\$514.09	\$6,570.59



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement	
Period Start Date	01/14/2024
Period End Date	01/27/2024
Pay Date	02/02/2024
Document	5594969
Net Pay	\$2,173.54

Pay Details

CALVIN ALFILER GARCIA 5421 Thornburn St Los Angeles, CA 90045 USA	Employee Number	261643	Pay Group	US HT SALARY
	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$546.92
HOLIDAY	01/15/2024	01/15/2024	8.0000	\$34.1827	\$273.46	\$820.38
SALARY	01/16/2024	01/16/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/17/2024	01/17/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/18/2024	01/18/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/19/2024	01/19/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/22/2024	01/22/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/23/2024	01/23/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/24/2024	01/24/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/25/2024	01/25/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/26/2024	01/26/2024	8.0000	\$34.1827	\$273.46	\$6,836.50
Total Hours Worked 0.0000			Total Hours 80.0000			

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$42.31	\$126.93	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$50.00)	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$83.31	\$249.93	\$185.82	\$557.46
LTD BUY UP EE	No	\$3.56	\$10.68	—	—
PPO (DEN) PREM	Yes	\$35.26	\$105.78	\$13.67	\$41.01
SUPL LIFE CHILD	No	\$0.92	\$2.76	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$35.55	\$0.00	\$0.00
SUPL LIFE SPOUS	No	\$0.54	\$1.62	\$0.00	\$0.00
VISION PREMIUM	Yes	\$10.28	\$30.84	\$0.01	\$0.03
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.03
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$4.92

Taxes

Tax	Current	YTD
Federal Income Tax	\$116.88	\$350.64
Employee Medicare	\$37.17	\$111.51
Social Security Employee Tax	\$158.93	\$476.80
CA State Income Tax	\$31.86	\$95.58
CA Disability Employee	\$28.19	\$84.59

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	163.0769
Personal Time	0.0000	0.0000
Volunteer Plans	8.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,173.54
Total		\$2,173.54

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,563.44	\$373.03	\$188.03	\$2,173.54
YTD	\$8,203.80	\$7,690.32	\$1,119.12	\$514.09	\$6,570.59



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement	
Period Start Date	12/31/2023
Period End Date	01/13/2024
Pay Date	01/19/2024
Document	5584148
Net Pay	\$2,223.52

Pay Details

CALVIN ALFILER GARCIA 5421 Thornburn St Los Angeles, CA 90045 USA	Employee Number	261643	Pay Group	US HT SALARY
	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF	01/02/2024	01/02/2024	8.0000	\$34.1827	\$273.46	\$546.92
HOLIDAY	01/01/2024	01/01/2024	8.0000	\$34.1827	\$273.46	\$546.92
SALARY	01/03/2024	01/03/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/04/2024	01/04/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/05/2024	01/05/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/08/2024	01/08/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/09/2024	01/09/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/10/2024	01/10/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/11/2024	01/11/2024	8.0000	\$34.1827	\$273.46	
SALARY	01/12/2024	01/12/2024	8.0000	\$34.1827	\$273.46	\$4,375.36
Total Hours Worked 0.0000 Total Hours 80.0000						

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$42.31	\$84.62	\$0.00	\$0.00
HOME OFC REIMB	No	(\$50.00)	(\$50.00)	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$83.31	\$166.62	\$185.82	\$371.64
LTD BUY UP EE	No	\$3.56	\$7.12	—	—
PPO (DEN) PREM	Yes	\$35.26	\$70.52	\$13.67	\$27.34
SUPL LIFE CHILD	No	\$0.92	\$1.84	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$23.70	\$0.00	\$0.00
SUPL LIFE SPOUS	No	\$0.54	\$1.08	\$0.00	\$0.00
VISION PREMIUM	Yes	\$10.28	\$20.56	\$0.01	\$0.02
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.02
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$3.28

Taxes

Tax	Current	YTD
Federal Income Tax	\$116.88	\$233.76
Employee Medicare	\$37.17	\$74.34
Social Security Employee Tax	\$158.94	\$317.87
CA State Income Tax	\$31.86	\$63.72
CA Disability Employee	\$28.20	\$56.40

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	158.4615
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,223.52
Total		\$2,223.52

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,563.44	\$373.05	\$138.03	\$2,223.52
YTD	\$5,469.20	\$5,126.88	\$746.09	\$326.06	\$4,397.05



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement

Period Start Date 12/03/2023
Period End Date 12/16/2023
Pay Date 12/22/2023
Document 5557113

Net Pay \$2,259.51

Pay Details

CALVIN ALFILER GARCIA	Employee Number	261643	Pay Group	US HT SALARY
5421 Thornburn St	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
Los Angeles, CA 90045	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
USA	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF	12/06/2023	12/06/2023	8.0000	\$34.1827	\$273.46	
FLEX TIME OFF	12/13/2023	12/13/2023	8.0000	\$34.1827	\$273.46	\$1,616.76
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,600.76
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S			0.0000	\$0.0000	\$0.00	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
RETRO PAY			0.0000	\$0.0000	\$0.00	\$80.02
SALARY	12/04/2023	12/04/2023	8.0000	\$34.1827	\$273.46	
SALARY	12/05/2023	12/05/2023	8.0000	\$34.1827	\$273.46	
SALARY	12/07/2023	12/07/2023	8.0000	\$34.1827	\$273.46	
SALARY	12/08/2023	12/08/2023	8.0000	\$34.1827	\$273.46	
SALARY	12/11/2023	12/11/2023	8.0000	\$34.1827	\$273.46	
SALARY	12/12/2023	12/12/2023	8.0000	\$34.1827	\$273.46	
SALARY	12/14/2023	12/14/2023	8.0000	\$34.1827	\$273.46	
SALARY	12/15/2023	12/15/2023	8.0000	\$34.1827	\$273.46	\$65,060.24

Total Hours Worked 0.0000

Total Hours 80.0000

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
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HLTH CARE FSA	Yes	\$38.47	\$1,000.22	\$0.00	\$0.00
HOME OFC REIMB	No	(\$50.00)	(\$600.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$70.06	\$1,821.56	\$156.25	\$4,062.50
LTD BUY UP EE	No	\$3.56	\$90.14	—	—
PPO (DEN) PREM	Yes	\$7.19	\$186.94	\$8.10	\$210.60
PR ACH FUNDING	No	\$0.00	\$73.18	\$0.00	\$0.00
SUPL LIFE CHILD	No	\$0.93	\$24.18	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$282.90	\$0.00	\$0.00
VISION PREMIUM	Yes	\$4.20	\$109.20	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.26
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$41.54

Taxes

Tax	Current	YTD
Federal Income Tax	\$128.76	\$3,678.73
Employee Medicare	\$37.91	\$1,022.30
Social Security Employee Tax	\$162.11	\$4,371.21
CA State Income Tax	\$36.52	\$1,167.41
CA Disability Employee	\$23.53	\$634.53

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	165.2308
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,259.51
Total		\$2,259.51

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,614.68	\$388.83	\$86.26	\$2,259.51
YTD	\$73,621.32	\$67,317.90	\$10,874.18	\$6,173.82	\$56,573.32



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement

Period Start Date 11/19/2023
Period End Date 12/02/2023
Pay Date 12/08/2023
Document 5543344

Net Pay \$2,209.50

Pay Details

CALVIN ALFILER GARCIA	Employee Number	261643	Pay Group	US HT SALARY
5421 Thornburn St	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
Los Angeles, CA 90045	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
USA	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF	11/24/2023	11/24/2023	8.0000	\$34.1827	\$273.46	\$1,069.84
HOLIDAY	11/23/2023	11/23/2023	8.0000	\$34.1827	\$273.46	\$1,600.76
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S			0.0000	\$0.0000	\$0.00	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
RETRO PAY			0.0000	\$0.0000	\$0.00	\$80.02
SALARY	11/20/2023	11/20/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/21/2023	11/21/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/22/2023	11/22/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/27/2023	11/27/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/28/2023	11/28/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/29/2023	11/29/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/30/2023	11/30/2023	8.0000	\$34.1827	\$273.46	
SALARY	12/01/2023	12/01/2023	8.0000	\$34.1827	\$273.46	\$62,872.56

Total Hours Worked 0.0000

Total Hours 80.0000

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$38.47	\$961.75	\$0.00	\$0.00

HOME OFC REIMB	No	\$0.00	(\$550.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$70.06	\$1,751.50	\$156.25	\$3,906.25
LTD BUY UP EE	No	\$3.56	\$86.58	—	—
PPO (DEN) PREM	Yes	\$7.19	\$179.75	\$8.10	\$202.50
PR ACH FUNDING	No	\$0.00	\$73.18	\$0.00	\$0.00
SUPL LIFE CHILD	No	\$0.93	\$23.25	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$271.05	\$0.00	\$0.00
VISION PREMIUM	Yes	\$4.20	\$105.00	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.25
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$39.90

Taxes

Tax	Current	YTD
Federal Income Tax	\$128.76	\$3,549.97
Employee Medicare	\$37.92	\$984.39
Social Security Employee Tax	\$162.11	\$4,209.10
CA State Income Tax	\$36.52	\$1,130.89
CA Disability Employee	\$23.53	\$611.00

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	176.6154
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,209.50
Total		\$2,209.50

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,614.68	\$388.84	\$136.26	\$2,209.50
YTD	\$70,886.72	\$64,703.22	\$10,485.35	\$6,087.56	\$54,313.81



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement

Period Start Date 11/05/2023
Period End Date 11/18/2023
Pay Date 11/24/2023
Document 5530862

Net Pay \$2,259.50

Pay Details

CALVIN ALFILER GARCIA	Employee Number	261643	Pay Group	US HT SALARY
5421 Thornburn St	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
Los Angeles, CA 90045	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
USA	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,327.30
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S			0.0000	\$0.0000	\$0.00	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
RETRO PAY			0.0000	\$0.0000	\$0.00	\$80.02
SALARY	11/06/2023	11/06/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/07/2023	11/07/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/08/2023	11/08/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/09/2023	11/09/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/10/2023	11/10/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/13/2023	11/13/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/14/2023	11/14/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/15/2023	11/15/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/16/2023	11/16/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/17/2023	11/17/2023	8.0000	\$34.1827	\$273.46	\$60,684.88

Total Hours Worked 0.0000

Total Hours 80.0000

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$38.47	\$923.28	\$0.00	\$0.00
HOME OFC REIMB	No	(\$50.00)	(\$550.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$70.06	\$1,681.44	\$156.25	\$3,750.00
LTD BUY UP EE	No	\$3.56	\$83.02	—	—
PPO (DEN) PREM	Yes	\$7.19	\$172.56	\$8.10	\$194.40
PR ACH FUNDING	No	\$0.00	\$73.18	\$0.00	\$0.00
SUPL LIFE CHILD	No	\$0.93	\$22.32	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$259.20	\$0.00	\$0.00
VISION PREMIUM	Yes	\$4.20	\$100.80	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.24
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$38.26

Taxes

Tax	Current	YTD
Federal Income Tax	\$128.76	\$3,421.21
Employee Medicare	\$37.91	\$946.47
Social Security Employee Tax	\$162.11	\$4,046.99
CA State Income Tax	\$36.52	\$1,094.37
CA Disability Employee	\$23.54	\$587.47

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	0.0000	180.0000
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,259.50
Total		\$2,259.50

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,614.68	\$388.84	\$86.26	\$2,259.50
YTD	\$68,152.12	\$62,088.54	\$10,096.51	\$5,951.30	\$52,104.31



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement

Period Start Date 11/13/2023
Period End Date 11/17/2023
Pay Date 11/14/2023
Document 6027003

Net Pay \$0.00

Pay Details

CALVIN ALFILER GARCIA	Employee Number	261643	Pay Group	US HT SALARY
5421 Thornburn St	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
Los Angeles, CA 90045	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
USA	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,327.30
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S			0.0000	\$0.0000	\$0.00	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
RETRO PAY	11/14/2023	11/14/2023			\$80.02	\$80.02
SALARY			0.0000	\$0.0000	\$0.00	\$57,950.28

Total Hours Worked 0.0000

Total Hours 0.0000

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
HLTH CARE FSA	Yes	\$0.00	\$884.81	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$500.00)	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$0.00	\$1,611.38	\$0.00	\$3,593.75
LTD BUY UP EE	No	\$0.00	\$79.46	—	—
PPO (DEN) PREM	Yes	\$0.00	\$165.37	\$0.00	\$186.30
PR ACH FUNDING	No	\$73.18	\$73.18	\$0.00	\$0.00
SUPL LIFE CHILD	No	\$0.00	\$21.39	\$0.00	\$0.00

SUPL LIFE EE	No	\$0.00	\$247.35	\$0.00	\$0.00
VISION PREMIUM	Yes	\$0.00	\$96.60	\$0.00	\$0.00
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
EAP ER	No	\$0.00	\$0.00	\$0.00	\$0.23
LTD CORE ER	No	\$0.00	\$0.00	\$0.00	\$36.62

Taxes

Tax	Current	YTD
Federal Income Tax	\$0.00	\$3,292.45
Employee Medicare	\$1.16	\$908.56
Social Security Employee Tax	\$4.96	\$3,884.88
CA State Income Tax	\$0.00	\$1,057.85
CA Disability Employee	\$0.72	\$563.93

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	0.0000	180.0000
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
No records found		

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$80.02	\$80.02	\$6.84	\$73.18	\$0.00
YTD	\$65,417.52	\$59,473.86	\$9,707.67	\$5,865.04	\$49,844.81



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement

Period Start Date 10/22/2023
Period End Date 11/04/2023
Pay Date 11/09/2023
Document 5519444

Net Pay \$2,209.51

Pay Details

CALVIN ALFILER GARCIA	Employee Number	261643	Pay Group	US HT SALARY
5421 Thornburn St	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
Los Angeles, CA 90045	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
USA	Pay Rate	\$34.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,327.30
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S			0.0000	\$0.0000	\$0.00	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
SALARY	10/23/2023	10/23/2023	8.0000	\$34.1827	\$273.46	
SALARY	10/24/2023	10/24/2023	8.0000	\$34.1827	\$273.46	
SALARY	10/25/2023	10/25/2023	8.0000	\$34.1827	\$273.46	
SALARY	10/26/2023	10/26/2023	8.0000	\$34.1827	\$273.46	
SALARY	10/27/2023	10/27/2023	8.0000	\$34.1827	\$273.46	
SALARY	10/30/2023	10/30/2023	8.0000	\$34.1827	\$273.46	
SALARY	10/31/2023	10/31/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/01/2023	11/01/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/02/2023	11/02/2023	8.0000	\$34.1827	\$273.46	
SALARY	11/03/2023	11/03/2023	8.0000	\$34.1827	\$273.46	\$57,950.28

Total Hours Worked 0.0000

Total Hours 80.0000

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
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HLTH CARE FSA	Yes	\$38.47	\$884.81	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$500.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$70.06	\$1,611.38	\$156.25	\$3,593.75
LTD BUY UP EE	No	\$3.56	\$79.46	—	—
PPO (DEN) PREM	Yes	\$7.19	\$165.37	\$8.10	\$186.30
SUPL LIFE CHILD	No	\$0.93	\$21.39	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$247.35	\$0.00	\$0.00
VISION PREMIUM	Yes	\$4.20	\$96.60	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.23
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$1.64	\$36.62

Taxes

Tax	Current	YTD
Federal Income Tax	\$128.76	\$3,292.45
Employee Medicare	\$37.91	\$907.40
Social Security Employee Tax	\$162.11	\$3,879.92
CA State Income Tax	\$36.52	\$1,057.85
CA Disability Employee	\$23.53	\$563.21

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	0.0000	180.0000
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,209.51
Total		\$2,209.51

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,734.60	\$2,614.68	\$388.83	\$136.26	\$2,209.51
YTD	\$65,337.50	\$59,393.84	\$9,700.83	\$5,791.86	\$49,844.81



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement

Period Start Date 10/08/2023
Period End Date 10/21/2023
Pay Date 10/27/2023
Document 5509045

Net Pay \$2,199.57

Pay Details

CALVIN ALFILER GARCIA	Employee Number	261643	Pay Group	US HT SALARY
5421 Thornburn St	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
Los Angeles, CA 90045	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
USA	Pay Rate	\$33.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,327.30
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S			0.0000	\$0.0000	\$0.00	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
SALARY	10/09/2023	10/09/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/10/2023	10/10/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/11/2023	10/11/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/12/2023	10/12/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/13/2023	10/13/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/16/2023	10/16/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/17/2023	10/17/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/18/2023	10/18/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/19/2023	10/19/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/20/2023	10/20/2023	8.0000	\$33.1827	\$265.46	\$55,215.68

Total Hours Worked 0.0000

Total Hours 80.0000

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
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HLTH CARE FSA	Yes	\$38.47	\$846.34	\$0.00	\$0.00
HOME OFC REIMB	No	(\$50.00)	(\$500.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$70.06	\$1,541.32	\$156.25	\$3,437.50
LTD BUY UP EE	No	\$3.45	\$75.90	—	—
PPO (DEN) PREM	Yes	\$7.19	\$158.18	\$8.10	\$178.20
SUPL LIFE CHILD	No	\$0.93	\$20.46	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$235.50	\$0.00	\$0.00
VISION PREMIUM	Yes	\$4.20	\$92.40	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.22
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$1.59	\$34.98

Taxes

Tax	Current	YTD
Federal Income Tax	\$119.16	\$3,163.69
Employee Medicare	\$36.76	\$869.49
Social Security Employee Tax	\$157.15	\$3,717.81
CA State Income Tax	\$33.00	\$1,021.33
CA Disability Employee	\$22.81	\$539.68

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.0000	180.0000
Personal Time	0.0000	0.0000
Volunteer Plans	8.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,199.57
Total		\$2,199.57

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,654.60	\$2,534.68	\$368.88	\$86.15	\$2,199.57
YTD	\$62,602.90	\$56,779.16	\$9,312.00	\$5,655.60	\$47,635.30

Pay Details

Pay Group	US HT SALARY
Location	CA - HT HEADQUARTERS
GL Company	HTUS - HOT TOPIC USA
Region	HQMER - HQ MERCHANDISING
Area	MERCH - MERCHANDISING
Department	7480 - BUYING SOURCING

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,327.30
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S			0.0000	\$0.0000	\$0.00	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
SALARY	09/25/2023	09/25/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/26/2023	09/26/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/27/2023	09/27/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/28/2023	09/28/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/29/2023	09/29/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/02/2023	10/02/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/03/2023	10/03/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/04/2023	10/04/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/05/2023	10/05/2023	8.0000	\$33.1827	\$265.46	
SALARY	10/06/2023	10/06/2023	8.0000	\$33.1827	\$265.46	\$52,561.08

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$38.47	\$807.87	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$450.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$70.06	\$1,471.26	\$156.25	\$3,281.25
LTD BUY UP EE	No	\$3.45	\$72.45	—	—
PPO (DEN) PREM	Yes	\$7.19	\$150.99	\$8.10	\$170.10
SUPL LIFE CHILD	No	\$0.93	\$19.53	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$223.65	\$0.00	\$0.00
VISION PREMIUM	Yes	\$4.20	\$88.20	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.21
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$1.59	\$33.39

Tax	Current	YTD
Federal Income Tax	\$119.16	\$3,044.53
Employee Medicare	\$36.75	\$832.73
Social Security Employee Tax	\$157.15	\$3,560.66
CA State Income Tax	\$33.00	\$988.33
CA Disability Employee	\$22.81	\$516.87

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	176.0000
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,149.58
Total		\$2,149.58

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,654.60	\$2,534.68	\$368.87	\$136.15	\$2,149.58
YTD	\$59,948.30	\$54,244.48	\$8,943.12	\$5,569.45	\$45,435.73

Pay Details

Employee Number	261643
SSN	XXX-XX-XXXX
Job	GRAPHIC DESIGNER
Pay Rate	\$33.1827
Pay Frequency	Biweekly

Pay Group	US HT SALARY
Location	CA - HT HEADQUARTERS
GL Company	HTUS - HOT TOPIC USA
Region	HQMER - HQ MERCHANDISING
Area	MERCH - MERCHANDISING
Department	7480 - BUYING SOURCING

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,327.30
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S			0.0000	\$0.0000	\$0.00	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
SALARY	09/11/2023	09/11/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/12/2023	09/12/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/13/2023	09/13/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/14/2023	09/14/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/15/2023	09/15/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/18/2023	09/18/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/19/2023	09/19/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/20/2023	09/20/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/21/2023	09/21/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/22/2023	09/22/2023	8.0000	\$33.1827	\$265.46	\$49,906.48

Total Hours Worked 0.0000 Total Hours 80.0000

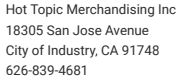
Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$38.47	\$769.40	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$450.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$70.06	\$1,401.20	\$156.25	\$3,125.00
LTD BUY UP EE	No	\$3.45	\$69.00	—	—
PPO (DEN) PREM	Yes	\$7.19	\$143.80	\$8.10	\$162.00
SUPL LIFE CHILD	No	\$0.93	\$18.60	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$211.80	\$0.00	\$0.00
VISION PREMIUM	Yes	\$4.20	\$84.00	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.20
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$1.59	\$31.80

Tax	Current	YTD
Federal Income Tax	\$119.16	\$2,925.37
Employee Medicare	\$36.75	\$795.98
Social Security Employee Tax	\$157.15	\$3,403.51
CA State Income Tax	\$33.00	\$955.33
CA Disability Employee	\$22.81	\$494.06

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	171.3846
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,149.58
Total		\$2,149.58

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,654.60	\$2,534.68	\$368.87	\$136.15	\$2,149.58
YTD	\$57,293.70	\$51,709.80	\$8,574.25	\$5,433.30	\$43,286.15



Pay Statement	
Period Start Date	08/27/2023
Period End Date	09/09/2023
Pay Date	09/20/2023
Document	5473195
Net Pay	\$500.70

Pay Details

Employee Number	261643
SSN	XXX-XX-XXXX
Job	GRAPHIC DESIGNER
Pay Rate	\$33.1827
Pay Frequency	Biweekly

Pay Group	US HT SALARY
Location	CA - HT HEADQUARTERS
GL Company	HTUS - HOT TOPIC USA
Region	HQMER - HQ MERCHANDISING
Area	MERCH - MERCHANDISING
Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,327.30
HT CA SPL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S	07/29/2023	07/29/2023			\$845.49	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
SALARY			0.0000	\$0.0000	\$0.00	\$47,251.88
Total Hours Worked 0.0000	Total Hours 0.0000					

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$0.00	\$730.93	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$450.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$0.00	\$1,331.14	\$0.00	\$2,968.75
LTD BUY UP EE	No	\$0.00	\$65.55	—	—
PPO (DEN) PREM	Yes	\$0.00	\$136.61	\$0.00	\$153.90
SUPL LIFE CHILD	No	\$0.00	\$17.67	\$0.00	\$0.00
SUPL LIFE EE	No	\$0.00	\$199.95	\$0.00	\$0.00
VISION PREMIUM	Yes	\$0.00	\$79.80	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.00	\$0.19
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$0.00	\$30.21

Taxes

Tax	Current	YTD
Federal Income Tax	\$186.01	\$2,806.21
Employee Medicare	\$12.26	\$759.23
Social Security Employee Tax	\$52.42	\$3,246.36
CA State Income Tax	\$86.49	\$922.33
CA Disability Employee	\$7.61	\$471.25

Paid Time Off

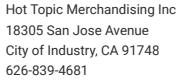
Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	0.0000	166.7693
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$500.70
Total		\$500.70

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$845.49	\$845.49	\$344.79	\$0.00	\$500.70
YTD	\$54,639.10	\$49,175.12	\$8,205.38	\$5,297.15	\$41,136.57



Pay Statement	
Period Start Date	08/27/2023
Period End Date	09/09/2023
Pay Date	09/20/2023
Document	5473195
Net Pay	\$500.70

Pay Details

Employee Number	261643
SSN	XXX-XX-XXXX
Job	GRAPHIC DESIGNER
Pay Rate	\$33.1827
Pay Frequency	Biweekly

Pay Group	US HT SALARY
Location	CA - HT HEADQUARTERS
GL Company	HTUS - HOT TOPIC USA
Region	HQMER - HQ MERCHANDISING
Area	MERCH - MERCHANDISING
Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY			0.0000	\$0.0000	\$0.00	\$1,327.30
HT CA SPL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR2BONUS-S	07/29/2023	07/29/2023			\$845.49	\$845.49
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
SALARY			0.0000	\$0.0000	\$0.00	\$47,251.88
Total Hours Worked 0.0000	Total Hours 0.0000					

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$0.00	\$730.93	\$0.00	\$0.00
HOME OFC REIMB	No	\$0.00	(\$450.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$0.00	\$1,331.14	\$0.00	\$2,968.75
LTD BUY UP EE	No	\$0.00	\$65.55	—	—
PPO (DEN) PREM	Yes	\$0.00	\$136.61	\$0.00	\$153.90
SUPL LIFE CHILD	No	\$0.00	\$17.67	\$0.00	\$0.00
SUPL LIFE EE	No	\$0.00	\$199.95	\$0.00	\$0.00
VISION PREMIUM	Yes	\$0.00	\$79.80	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.00	\$0.19
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$0.00	\$30.21

Taxes

Tax	Current	YTD
Federal Income Tax	\$186.01	\$2,806.21
Employee Medicare	\$12.26	\$759.23
Social Security Employee Tax	\$52.42	\$3,246.36
CA State Income Tax	\$86.49	\$922.33
CA Disability Employee	\$7.61	\$471.25

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	0.0000	166.7693
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$500.70
Total		\$500.70

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$845.49	\$845.49	\$344.79	\$0.00	\$500.70
YTD	\$54,639.10	\$49,175.12	\$8,205.38	\$5,297.15	\$41,136.57



Hot Topic Merchandising Inc
18305 San Jose Avenue
City of Industry, CA 91748
626-839-4681

Pay Statement	
Period Start Date	08/27/2023
Period End Date	09/09/2023
Pay Date	09/15/2023
Document	5463896
Net Pay	\$2,199.57

Pay Details

CALVIN ALFILER GARCIA 5421 Thornburn St Los Angeles, CA 90045 USA	Employee Number	261643	Pay Group	US HT SALARY
	SSN	XXX-XX-XXXX	Location	CA - HT HEADQUARTERS
	Job	GRAPHIC DESIGNER	GL Company	HTUS - HOT TOPIC USA
	Pay Rate	\$33.1827	Region	HQMER - HQ MERCHANDISING
	Pay Frequency	Biweekly	Area	MERCH - MERCHANDISING
			Department	7480 - BUYING SOURCING

Earnings

Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
FLEX TIME OFF			0.0000	\$0.0000	\$0.00	\$796.38
HOLIDAY	09/04/2023	09/04/2023	8.0000	\$33.1827	\$265.46	\$1,327.30
HT CA SPSL1 S			0.0000	\$0.0000	\$0.00	\$1,061.84
QTR1BONUS-S			0.0000	\$0.0000	\$0.00	\$862.75
QTR4BONUS-S			0.0000	\$0.0000	\$0.00	\$2,493.46
SALARY	08/28/2023	08/28/2023	8.0000	\$33.1827	\$265.46	
SALARY	08/29/2023	08/29/2023	8.0000	\$33.1827	\$265.46	
SALARY	08/30/2023	08/30/2023	8.0000	\$33.1827	\$265.46	
SALARY	08/31/2023	08/31/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/01/2023	09/01/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/05/2023	09/05/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/06/2023	09/06/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/07/2023	09/07/2023	8.0000	\$33.1827	\$265.46	
SALARY	09/08/2023	09/08/2023	8.0000	\$33.1827	\$265.46	\$47,251.88
Total Hours Worked 0.0000			Total Hours 80.0000			

Deductions

Deduction	Pre-Tax	Employee Current	Employee YTD	Employer Current	Employer YTD
HLTH CARE FSA	Yes	\$38.47	\$730.93	\$0.00	\$0.00
HOME OFC REIMB	No	(\$50.00)	(\$450.00)	\$0.00	\$0.00
401K EE	Yes	\$0.00	\$3,185.50	\$0.00	\$0.00
KAIS SO.CA T1	Yes	\$70.06	\$1,331.14	\$156.25	\$2,968.75
LTD BUY UP EE	No	\$3.45	\$65.55	—	—
PPO (DEN) PREM	Yes	\$7.19	\$136.61	\$8.10	\$153.90
SUPL LIFE CHILD	No	\$0.93	\$17.67	\$0.00	\$0.00
SUPL LIFE EE	No	\$11.85	\$199.95	\$0.00	\$0.00
VISION PREMIUM	Yes	\$4.20	\$79.80	\$0.00	\$0.00
EAP ER	No	\$0.00	\$0.00	\$0.01	\$0.19
401k Match	Yes	\$0.00	\$0.00	\$0.00	\$530.90
LTD CORE ER	No	\$0.00	\$0.00	\$1.59	\$30.21

Taxes

Tax	Current	YTD
Federal Income Tax	\$119.16	\$2,620.20
Employee Medicare	\$36.75	\$746.97
Social Security Employee Tax	\$157.15	\$3,193.94
CA State Income Tax	\$33.00	\$835.84
CA Disability Employee	\$22.82	\$463.64

Paid Time Off

Plan	Current	Balance
HT CA Covid Pos	0.0000	0.0000
HT CA Covid VAC	0.0000	0.0000
Paid Time Off	4.6154	166.7693
Personal Time	0.0000	0.0000
Volunteer Plans	0.0000	8.0000

Net Pay Distribution

Account Number	Account Type	Amount
xxxxxx3359	Checking	\$2,199.57
Total		\$2,199.57

Pay Summary

	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,654.60	\$2,534.68	\$368.88	\$86.15	\$2,199.57
YTD	\$53,793.61	\$48,329.63	\$7,860.59	\$5,297.15	\$40,635.87

EXHIBIT 9

Debtor Name: VILLACORTA, GLADYS GRACE LIAD
Case Number: 732-24-13211

Payroll Statements			#1	#16	#25a		
Pay Period Beginning	Pay Period Ending	Pay Date	Gross	Taxes	Health Insurance	Net	YTD
							\$0.00
09/11/23	09/24/23					\$0.00	\$0.00
09/25/23	10/08/23					\$0.00	\$0.00
10/09/23	10/22/23					\$0.00	\$0.00
10/23/23	11/05/23					\$0.00	\$0.00
11/06/23	11/19/23					\$0.00	\$0.00
11/20/23	12/03/23	12/08/23	\$2,884.62	\$720.86		\$2,163.76	\$2,884.62
12/04/23	12/17/23	12/22/23	\$2,596.16	\$605.41		\$1,990.75	\$5,480.78
12/18/23	12/31/23	01/05/24	\$2,596.16	\$590.81		\$2,005.35	\$2,596.16
01/01/24	01/14/24	01/19/24	\$2,884.62	\$660.97	\$111.08	\$2,112.57	\$5,480.78
01/15/24	01/28/24	02/02/24	\$2,884.62	\$660.97	\$111.08	\$2,112.57	\$8,365.40
01/29/24	02/11/24	02/16/24	\$2,884.62	\$660.95	\$111.08	\$2,112.59	\$11,250.02
02/12/24	02/25/24	03/01/24	\$2,884.62	\$660.97	\$111.08	\$2,112.57	\$14,134.64
02/26/24	03/10/24	03/15/24	\$2,884.62	\$660.97	\$111.08	\$2,112.57	\$17,019.26
03/11/24	03/24/24	03/29/24	\$2,884.62	\$660.96	\$111.08	\$2,112.58	\$19,903.88
		Total	\$25,384.66	\$5,882.87	\$666.48	\$18,835.31	
		Monthly Avg	\$4,230.78	\$980.48	\$111.08	\$3,139.22	

Debtor 2 or non
Filing Spouse
Name: Calvin Garcia
Case Number: 732-24-13211

Payroll Statements			#1	#16	#18	#25a	#25b	#25c			
Pay Period Beginning	Pay Period Ending	Pay Date	Gross	Taxes	Life Insurance	Health Insurance	Disability Insurance	Health Savings Account	Other	Net	YTD
		09/29/23	\$57,293.70	\$ 8,574.25	\$ 230.40	\$ 1,629.00	\$ 69.00	\$ 769.40	\$ (450.00)	\$43,286.15	\$57,293.70
09/24/23	10/07/23	10/13/23	\$2,654.60	\$368.87	\$12.78	\$81.45	\$3.45	\$38.47		\$2,149.58	\$59,948.30
10/08/23	10/21/23	10/27/23	\$2,654.60	\$368.88	\$12.78	\$81.45	\$3.45	\$38.47	(\$50.00)	\$2,199.57	\$62,602.90
10/22/23	11/04/23	11/09/23	\$2,734.60	\$388.83	\$12.78	\$81.45	\$3.56	\$38.47		\$2,209.51	\$65,337.50
11/13/23	11/17/23	11/14/23	\$80.02	\$6.84					\$73.18	\$0.00	\$65,417.52
11/05/23	11/18/23	11/24/23	\$2,734.60	\$388.84	\$12.78	\$81.45	\$3.56	\$38.47	(\$50.00)	\$2,259.50	\$68,152.12
11/19/23	12/02/23	12/08/23	\$2,734.60	\$388.84	\$12.78	\$81.45	\$3.56	\$38.47		\$2,209.50	\$70,886.72
12/03/23	12/16/23	12/22/23	\$2,734.60	\$388.83	\$12.78	\$81.45	\$3.56	\$38.47	(\$50.00)	\$2,259.51	\$73,621.32
			\$2,734.60	\$388.83	\$12.78	\$81.45	\$3.56	\$38.47		\$2,209.51	\$2,734.60
12/17/23	12/30/23	01/19/24	\$2,734.60	\$373.05	\$13.31	\$128.85	\$3.56	\$42.31	(\$50.00)	\$2,223.52	\$5,469.20
12/31/23	01/13/24	02/02/24	\$2,734.60	\$373.03	\$13.31	\$128.85	\$3.56	\$42.31		\$2,173.54	\$8,203.80
01/14/24	01/27/24	02/16/24	\$2,734.60	\$373.04	\$13.31	\$128.85	\$3.56	\$42.31	(\$50.00)	\$2,223.53	\$10,938.40
01/28/24	02/10/24	03/01/24	\$2,734.60	\$500.95	\$13.31	\$128.85	\$3.56	\$42.31		\$2,045.62	\$13,673.00
02/11/24	02/24/24	03/15/24	\$2,734.60	\$500.94	\$13.31	\$128.85	\$3.56	\$42.31	(\$50.00)	\$2,095.63	\$16,407.60
02/25/24	03/09/24	03/29/24	\$2,734.60	\$500.93	\$13.31	\$128.85	\$3.56	\$42.31		\$2,045.64	\$19,142.20
		Total	\$35,469.82	\$5,310.70	\$169.32	\$1,343.25	\$46.06	\$523.15	(\$226.82)	\$28,304.16	
		Monthly Avg	\$5,911.64	\$885.12	\$28.22	\$223.88	\$7.68	\$87.19	(\$37.80)	\$4,717.36	

EXHIBIT 10

Bankruptcy Allowable Living Expenses
(Cases Filed Between April 1, 2024 and May 14, 2024, Inclusive)

Local Housing and Utilities Standards*

California

		Family Size and Expense Type									
		1 Person		2 People		3 People		4 People		5 or More People	
County	FIPS Code	Non-Mortgage	Mortgage/Rent	Non-Mortgage	Mortgage/Rent	Non-Mortgage	Mortgage/Rent	Non-Mortgage	Mortgage/Rent	Non-Mortgage	Mortgage/Rent
Alameda County	06001	\$606	\$2,636	\$712	\$3,095	\$750	\$3,262	\$837	\$3,636	\$850	\$3,696
Alpine County	06003	\$797	\$1,612	\$935	\$1,894	\$986	\$1,995	\$1,099	\$2,225	\$1,117	\$2,260
Amador County	06005	\$645	\$1,411	\$757	\$1,658	\$798	\$1,747	\$890	\$1,948	\$904	\$1,979
Butte County	06007	\$609	\$1,366	\$715	\$1,604	\$754	\$1,690	\$841	\$1,884	\$854	\$1,915
Calaveras County	06009	\$708	\$1,463	\$831	\$1,719	\$876	\$1,811	\$977	\$2,019	\$992	\$2,052
Colusa County	06011	\$628	\$1,262	\$737	\$1,483	\$777	\$1,562	\$866	\$1,742	\$880	\$1,770
Contra Costa County	06013	\$608	\$2,380	\$714	\$2,795	\$753	\$2,945	\$839	\$3,284	\$853	\$3,337
Del Norte County	06015	\$579	\$1,023	\$680	\$1,202	\$716	\$1,267	\$799	\$1,412	\$812	\$1,435
El Dorado County	06017	\$671	\$1,931	\$788	\$2,268	\$831	\$2,389	\$926	\$2,664	\$941	\$2,707
Fresno County	06019	\$610	\$1,312	\$717	\$1,541	\$755	\$1,624	\$842	\$1,811	\$855	\$1,840
Glenn County	06021	\$655	\$1,168	\$769	\$1,372	\$810	\$1,446	\$904	\$1,611	\$918	\$1,638
Humboldt County	06023	\$593	\$1,425	\$696	\$1,675	\$733	\$1,765	\$818	\$1,967	\$831	\$1,999
Imperial County	06025	\$614	\$1,143	\$721	\$1,342	\$759	\$1,415	\$847	\$1,577	\$860	\$1,603
Inyo County	06027	\$607	\$1,604	\$713	\$1,883	\$752	\$1,984	\$838	\$2,213	\$852	\$2,248
Kern County	06029	\$603	\$1,266	\$708	\$1,487	\$746	\$1,567	\$832	\$1,747	\$845	\$1,776
Kings County	06031	\$608	\$1,188	\$714	\$1,396	\$753	\$1,470	\$839	\$1,640	\$853	\$1,666
Lake County	06033	\$667	\$1,189	\$783	\$1,397	\$825	\$1,472	\$920	\$1,641	\$935	\$1,668
Lassen County	06035	\$601	\$1,118	\$706	\$1,313	\$744	\$1,383	\$829	\$1,543	\$843	\$1,567
Los Angeles County	06037	\$646	\$2,171	\$758	\$2,550	\$799	\$2,687	\$891	\$2,996	\$906	\$3,044
Madera County	06039	\$607	\$1,284	\$713	\$1,508	\$752	\$1,588	\$838	\$1,771	\$852	\$1,799
Marin County	06041	\$659	\$3,312	\$774	\$3,890	\$816	\$4,099	\$909	\$4,571	\$924	\$4,645
Mariposa	06043	\$558	\$1,397	\$655	\$1,641	\$690	\$1,729	\$770	\$1,927	\$782	\$1,959

Family Size and Expense Type

County	FIPS Code	1 Person		2 People		3 People		4 People		5 or More People	
		Non-Mortgage	Mortgage/Rent	Non-Mortgage	Mortgage/Rent	Non-Mortgage	Mortgage/Rent	Non-Mortgage	Mortgage/Rent	Non-Mortgage	Mortgage/Rent
County											
Mendocino County	06045	\$650	\$1,534	\$764	\$1,801	\$805	\$1,898	\$897	\$2,117	\$912	\$2,150
Merced County	06047	\$628	\$1,206	\$738	\$1,416	\$778	\$1,492	\$867	\$1,664	\$881	\$1,691
Modoc County	06049	\$607	\$822	\$713	\$965	\$752	\$1,016	\$838	\$1,133	\$851	\$1,152
Mono County	06051	\$815	\$1,447	\$957	\$1,700	\$1,008	\$1,792	\$1,124	\$1,998	\$1,142	\$2,030
Monterey County	06053	\$578	\$2,031	\$679	\$2,385	\$715	\$2,514	\$797	\$2,803	\$810	\$2,848
Napa County	06055	\$629	\$2,337	\$739	\$2,745	\$779	\$2,892	\$868	\$3,225	\$882	\$3,277
Nevada County	06057	\$674	\$1,810	\$792	\$2,125	\$834	\$2,240	\$930	\$2,498	\$945	\$2,538
Orange County	06059	\$594	\$2,438	\$698	\$2,864	\$735	\$3,018	\$820	\$3,365	\$833	\$3,419
Placer County	06061	\$625	\$2,080	\$735	\$2,442	\$774	\$2,574	\$863	\$2,870	\$877	\$2,916
Plumas County	06063	\$619	\$1,159	\$727	\$1,362	\$767	\$1,434	\$855	\$1,599	\$869	\$1,625
Riverside County	06065	\$619	\$1,740	\$727	\$2,043	\$766	\$2,153	\$854	\$2,401	\$867	\$2,440
Sacramento County	06067	\$629	\$1,638	\$738	\$1,925	\$778	\$2,028	\$868	\$2,261	\$882	\$2,297
San Benito County	06069	\$622	\$2,263	\$730	\$2,659	\$770	\$2,801	\$858	\$3,124	\$872	\$3,174
San Bernardino County	06071	\$606	\$1,543	\$712	\$1,812	\$751	\$1,909	\$837	\$2,129	\$850	\$2,164
San Diego County	06073	\$640	\$2,227	\$752	\$2,615	\$792	\$2,756	\$884	\$3,072	\$898	\$3,122
San Francisco County	06075	\$662	\$3,237	\$777	\$3,802	\$819	\$4,006	\$913	\$4,467	\$928	\$4,539
San Joaquin County	06077	\$657	\$1,596	\$771	\$1,875	\$813	\$1,975	\$906	\$2,203	\$921	\$2,238
San Luis Obispo County	06079	\$570	\$2,079	\$669	\$2,443	\$705	\$2,574	\$786	\$2,870	\$799	\$2,916
San Mateo County	06081	\$651	\$3,151	\$765	\$3,701	\$806	\$3,900	\$898	\$4,349	\$913	\$4,419
Santa Barbara County	06083	\$578	\$2,071	\$679	\$2,433	\$715	\$2,564	\$798	\$2,858	\$810	\$2,905
Santa Clara County	06085	\$658	\$3,150	\$773	\$3,700	\$815	\$3,898	\$909	\$4,346	\$923	\$4,417
Santa Cruz County	06087	\$653	\$2,528	\$767	\$2,969	\$808	\$3,129	\$901	\$3,489	\$916	\$3,545
Shasta County	06089	\$632	\$1,251	\$742	\$1,469	\$782	\$1,548	\$872	\$1,726	\$886	\$1,754
Sierra County	06091	\$584	\$1,093	\$686	\$1,284	\$723	\$1,353	\$807	\$1,508	\$819	\$1,533

Family Size and Expense Type

County	FIPS Code	1 Person		2 People		3 People		4 People		5 or More People	
		Non-Mortgage	Mortgage/Rent	Non-Mortgage	Mortgage/Rent	Non-Mortgage	Mortgage/Rent	Non-Mortgage	Mortgage/Rent	Non-Mortgage	Mortgage/Rent
Siskiyou County	06093	\$630	\$1,048	\$740	\$1,231	\$780	\$1,297	\$870	\$1,446	\$883	\$1,470
Solano County	06095	\$618	\$1,879	\$726	\$2,206	\$765	\$2,325	\$853	\$2,592	\$867	\$2,634
Sonoma County	06097	\$632	\$2,187	\$742	\$2,569	\$782	\$2,707	\$872	\$3,018	\$886	\$3,067
Stanislaus County	06099	\$635	\$1,383	\$746	\$1,624	\$786	\$1,711	\$876	\$1,908	\$890	\$1,939
Sutter County	06101	\$620	\$1,360	\$728	\$1,597	\$768	\$1,682	\$856	\$1,876	\$870	\$1,906
Tehama County	06103	\$631	\$1,083	\$741	\$1,272	\$781	\$1,340	\$871	\$1,494	\$885	\$1,518
Trinity County	06105	\$552	\$1,184	\$647	\$1,391	\$682	\$1,466	\$761	\$1,634	\$773	\$1,661
Tulare County	06107	\$607	\$1,151	\$713	\$1,352	\$752	\$1,424	\$838	\$1,588	\$852	\$1,613
Tuolumne County	06109	\$657	\$1,444	\$771	\$1,696	\$813	\$1,787	\$906	\$1,993	\$921	\$2,025
Ventura County	06111	\$629	\$2,223	\$739	\$2,611	\$779	\$2,751	\$868	\$3,068	\$882	\$3,117
Yolo County	06113	\$629	\$1,844	\$739	\$2,166	\$779	\$2,282	\$868	\$2,545	\$882	\$2,586
Yuba County	06115	\$596	\$1,389	\$700	\$1,632	\$738	\$1,719	\$823	\$1,917	\$836	\$1,948

*** Note:** The IRS expense figures posted on this Web site are for use in completing bankruptcy forms. They are not for use in computing taxes or for any other tax administration purpose. Expense information for tax purposes can be found on the [IRS Web site](#).

EXHIBIT 11

IRS National Standards for Allowable Living Expenses

(Cases Filed Between April 1, 2024 and May 14, 2024, Inclusive)

Note: The IRS expense figures posted on this Web site are for use in completing bankruptcy forms. They are not for use in computing taxes or for any other tax administration purpose. Expense information for tax purposes can be found on the [IRS Web Site](#).

Collection Financial Standards for Food, Clothing and Other Items

Expense	One Person	Two Persons	Three Persons	Four Persons
Food	\$466	\$777	\$936	\$1,123
Housekeeping supplies	\$47	\$80	\$85	\$90
Apparel & services	\$96	\$145	\$207	\$252
Personal care products & services	\$43	\$78	\$91	\$97
Miscellaneous	\$189	\$309	\$381	\$431
Total	\$841	\$1,389	\$1,700	\$1,993

More than four persons	Additional Amount Per Person
For each additional person, add to four-person total allowance:	\$356

Bankruptcy Allowable Living Expenses – National Standards (See 11 U.S.C. § 707(b)(2)(A)(ii)(I))

Expense	One Person	Two Persons	Three Persons	Four Persons
Food & Clothing (Apparel & Services)*	\$562	\$922	\$1,143	\$1,375
5% of Food & Clothing	\$28	\$46	\$57	\$69

More than four persons	Additional Amount Per Person
Food & Clothing (Apparel & Services)*	\$246
5% of Food & Clothing	\$12

* This total may differ from the combination of the two amounts on the table above due to rounding.

EXHIBIT 12

Fill in this information to identify your case:

Debtor 1 GLADYS GRACE LIAD VILLACORTA
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Central District of California

Case number 732-24-13211
(If known)

Check one box only as directed in this form and in Form 122A-1Supp:

- ☐ 1. There is no presumption of abuse.
- ☒ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

- ☐ **Not married.** Fill out Column A, lines 2-11.
- ☐ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- ☒ **Married and your spouse is NOT filing with you. You and your spouse are:**
- ☒ **Living in the same household and are not legally separated.** Fill out both Columns A and B, lines 2-11.
- ☐ **Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse																
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ <u>4230.78</u>	\$ <u>5911.64</u>																
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ _____	\$ _____																
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ _____	\$ _____																
5. Net income from operating a business, profession, or farm	<table border="1"> <thead> <tr> <th>Debtor 1</th> <th>Debtor 2</th> </tr> </thead> <tbody> <tr> <td>Gross receipts (before all deductions)</td> <td>\$ _____</td> </tr> <tr> <td>Ordinary and necessary operating expenses</td> <td>— \$ _____ — \$ _____</td> </tr> <tr> <td>Net monthly income from a business, profession, or farm</td> <td>\$ <u>454.18</u></td> </tr> </tbody> </table>	Debtor 1	Debtor 2	Gross receipts (before all deductions)	\$ _____	Ordinary and necessary operating expenses	— \$ _____ — \$ _____	Net monthly income from a business, profession, or farm	\$ <u>454.18</u>	<table border="1"> <thead> <tr> <th>Debtor 1</th> <th>Debtor 2</th> </tr> </thead> <tbody> <tr> <td>Gross receipts (before all deductions)</td> <td>\$ _____</td> </tr> <tr> <td>Ordinary and necessary operating expenses</td> <td>— \$ _____ — \$ _____</td> </tr> <tr> <td>Net monthly income from rental or other real property</td> <td>\$ _____</td> </tr> </tbody> </table>	Debtor 1	Debtor 2	Gross receipts (before all deductions)	\$ _____	Ordinary and necessary operating expenses	— \$ _____ — \$ _____	Net monthly income from rental or other real property	\$ _____
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Gross receipts (before all deductions)	\$ _____																	
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Debtor 1	Debtor 2																	
Gross receipts (before all deductions)	\$ _____																	
Ordinary and necessary operating expenses	— \$ _____ — \$ _____																	
Net monthly income from rental or other real property	\$ _____																	
	Copy here → \$ <u>2,454.18</u>	\$ _____																
6. Net income from rental and other real property	<table border="1"> <thead> <tr> <th>Debtor 1</th> <th>Debtor 2</th> </tr> </thead> <tbody> <tr> <td>Gross receipts (before all deductions)</td> <td>\$ _____</td> </tr> <tr> <td>Ordinary and necessary operating expenses</td> <td>— \$ _____ — \$ _____</td> </tr> <tr> <td>Net monthly income from rental or other real property</td> <td>\$ _____</td> </tr> </tbody> </table>	Debtor 1	Debtor 2	Gross receipts (before all deductions)	\$ _____	Ordinary and necessary operating expenses	— \$ _____ — \$ _____	Net monthly income from rental or other real property	\$ _____	<table border="1"> <thead> <tr> <th>Debtor 1</th> <th>Debtor 2</th> </tr> </thead> <tbody> <tr> <td>Gross receipts (before all deductions)</td> <td>\$ _____</td> </tr> <tr> <td>Ordinary and necessary operating expenses</td> <td>— \$ _____ — \$ _____</td> </tr> <tr> <td>Net monthly income from rental or other real property</td> <td>\$ _____</td> </tr> </tbody> </table>	Debtor 1	Debtor 2	Gross receipts (before all deductions)	\$ _____	Ordinary and necessary operating expenses	— \$ _____ — \$ _____	Net monthly income from rental or other real property	\$ _____
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Gross receipts (before all deductions)	\$ _____																	
Ordinary and necessary operating expenses	— \$ _____ — \$ _____																	
Net monthly income from rental or other real property	\$ _____																	
	Copy here → \$ _____	\$ _____																
7. Interest, dividends, and royalties	\$ _____	\$ _____																

Debtor 1

GLADYS GRACE LIAD VILLACORTA

First Name

Middle Name

Last Name

Case number (if known) 732-24-13211

Column A
Debtor 1

Column B
Debtor 2 or
non-filing spouse

8. **Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \downarrow

For you \$ _____

For your spouse \$ _____

\$ _____

\$ _____

9. **Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

\$ _____

\$ _____

10. **Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

\$ _____

\$ _____

\$ _____

\$ _____

Total amounts from separate pages, if any.

+ \$ _____

+ \$ _____

11. **Calculate your total current monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ 6684.96

+ \$ 5911.64

= \$ 12596.60

Total current
monthly income

Part 2: Determine Whether the Means Test Applies to You

12. **Calculate your current monthly income for the year.** Follow these steps:

12a. Copy your total current monthly income from line 11. Copy line 11 here \rightarrow

\$ 12,596.60

Multiply by 12 (the number of months in a year).

x 12

12b. The result is your annual income for this part of the form.

12b.

\$151159.20

13. **Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

CA

Fill in the number of people in your household.

3

Fill in the median family income for your state and size of household. 13.

\$109458.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. **How do the lines compare?**

14a. ☐ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3.

14b. ☒ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.* Go to Part 3 and fill out Form 122A-2.

Debtor 1

GLADYS GRACE LIAD VILLACORTA

First Name

Middle Name

Last Name

Case number (if known) 732-24-13211

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

x

Signature of Debtor 1

Date

MM / DD / YYYY

x

Signature of Debtor 2

Date

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Fill in this information to identify your case:

Debtor 1 GLADYS GRACE LIAD VILLACORTA
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Central District of California

Case number 732-24-13211
(If known)

Check the appropriate box as directed in lines 40 or 42:

According to the calculations required by this Statement:

- ☐ 1. There is no presumption of abuse.
- ☒ 2. There is a presumption of abuse.

☐ Check if this is an amended filing

Official Form 122A-2

Chapter 7 Means Test Calculation

04/22

To fill out this form, you will need your completed copy of *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Determine Your Adjusted Income

1. Copy your total current monthly income..... Copy line 11 from Official Form 122A-1 here ➔ \$ 12,596.60

2. Did you fill out Column B in Part 1 of Form 122A-1?

- ☐ No. Fill in \$0 for the total on line 3.
- ☐ Yes. Is your spouse filing with you?
- ☒ No. Go to line 3.
- ☐ Yes. Fill in \$0 for the total on line 3.

3. Adjust your current monthly income by subtracting any part of your spouse's income not used to pay for the household expenses of you or your dependents. Follow these steps:

On line 11, Column B of Form 122A-1, was any amount of the income you reported for your spouse NOT regularly used for the household expenses of you or your dependents?

- ☒ No. Fill in 0 for the total on line 3.
- ☐ Yes. Fill in the information below:

State each purpose for which the income was used

For example, the income is used to pay your spouse's tax debt or to support people other than you or your dependents

Fill in the amount you are subtracting from your spouse's income

_____	\$ _____
_____	\$ _____
_____	+ \$ _____
Total.	\$ <u>0.00</u>

Copy total here ➔ — \$ 0.00

4. Adjust your current monthly income. Subtract the total on line 3 from line 1.

\$ 12,596.60

Debtor 1

GLADYS GRACE LIAD VILLACORTA

First Name

Middle Name

Last Name

Case number (if known) 732-24-13211

Part 2: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to *you*, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

3

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. \$ 1,700.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person \$ 79.00

7b. Number of people who are under 65 x 3

7c. **Subtotal.** Multiply line 7a by line 7b. \$ 237.00 Copy here ➔ \$ 237.00

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person \$ _____

7e. Number of people who are 65 or older x _____

7f. **Subtotal.** Multiply line 7d by line 7e. \$ _____ Copy here ➔ + \$ _____

7g. **Total.** Add lines 7c and 7f.....

\$ 237.00

Copy total here ➔

\$ 237.00

Debtor 1

GLADYS GRACE LIAD VILLACORTA
First Name Middle Name Last Name

Case number (if known) 732-24-13211

Local Standards

You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- Housing and utilities – Insurance and operating expenses
- Housing and utilities – Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart.

To find the chart, go online using the link specified in the separate instructions for this form.
This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities – Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. \$ 799.00

9. **Housing and utilities – Mortgage or rent expenses:**

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. \$ 2,687.00

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of the creditor	Average monthly payment
_____	\$ _____
_____	\$ _____
_____	+ \$ _____

Total average monthly payment

\$ 0.00Copy
here →– \$ 0.00Repeat this
amount on
line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (*total average monthly payment*) from line 9a (*mortgage or rent expense*). If this amount is less than \$0, enter \$0.

\$ 2,687.00Copy
here →\$ 2,687.00

10. **If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.** \$ _____

Explain
why: _____

11. **Local transportation expenses:** Check the number of vehicles for which you claim an ownership or operating expense.

- ☐ 0. Go to line 14.
☐ 1. Go to line 12.
☒ 2 or more. Go to line 12.

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

\$ 678.00

Debtor 1

GLADYS GRACE LIAD VILLACORTA
First Name Middle Name Last Name

Case number (if known) 732-24-13211

13. **Vehicle ownership or lease expense:** Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1 Describe Vehicle 1: 2008 Honda Fit

13a. Ownership or leasing costs using IRS Local Standard. \$ 0.00

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1	Average monthly payment
_____	\$ _____
_____	+ \$ _____
Total average monthly payment	\$ <u>0.00</u>

Copy
here →

— \$ 0.00

Repeat this
amount on
line 33b.

13c. Net Vehicle 1 ownership or lease expense

Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0.

\$ 0.00

Copy net
Vehicle 1
expense
here →

\$ 0.00

Vehicle 2 Describe Vehicle 2: 2004 Chevrolet Colorado

13d. Ownership or leasing costs using IRS Local Standard. \$ 0.00

13e. Average monthly payment for all debts secured by Vehicle 2.

Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthly payment
_____	\$ _____
_____	+ \$ _____
Total average monthly payment	\$ <u>0.00</u>

Copy
here →

— \$ 0.00

Repeat this
amount on
line 33c.

13f. Net Vehicle 2 ownership or lease expense

Subtract line 13e from 13d. If this amount is less than \$0, enter \$0.

\$ 0.00

Copy net
Vehicle 2
expense
here ... →

\$ 0.00

14. **Public transportation expense:** If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation* expense allowance regardless of whether you use public transportation.

\$ _____

15. **Additional public transportation expense:** If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*.

\$ _____

Debtor 1

GLADYS GRACE LIAD VILLACORTA

First Name

Middle Name

Last Name

Case number (if known) 732-24-13211

Other Necessary Expenses

In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

16. **Taxes:** The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, Social Security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. \$ 1,865.60
Do not include real estate, sales, or use taxes.
17. **Involuntary deductions:** The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. \$ _____
Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.
18. **Life insurance:** The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. \$ 28.22
19. **Court-ordered payments:** The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. \$ _____
Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.
20. **Education:** The total monthly amount that you pay for education that is either required:
☐ as a condition for your job, or
☐ for your physically or mentally challenged dependent child if no public education is available for similar services. \$ _____
21. **Childcare:** The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. \$ _____
Do not include payments for any elementary or secondary school education.
22. **Additional health care expenses, excluding insurance costs:** The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. \$ _____
Payments for health insurance or health savings accounts should be listed only in line 25.
23. **Optional telephones and telephone services:** The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. + \$ _____
Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.
24. **Add all of the expenses allowed under the IRS expense allowances.** \$ 7,994.82
Add lines 6 through 23.

Debtor 1

GLADYS GRACE LIAD VILLACORTA

First Name

Middle Name

Last Name

Case number (if known) 732-24-13211

Additional Expense Deductions

These are additional deductions allowed by the Means Test.

Note: Do not include any expense allowances listed in lines 6-24.

25. **Health insurance, disability insurance, and health savings account expenses.** The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.

Health insurance \$ 334.96

Disability insurance \$ 7.68

Health savings account + \$ 87.19

Total \$ 429.83

Copy total here → \$ 429.83

Do you actually spend this total amount?

☐ No. How much do you actually spend? \$☒ Yes

26. **Continuing contributions to the care of household or family members.** The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b).

\$

27. **Protection against family violence.** The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. By law, the court must keep the nature of these expenses confidential.

\$

28. **Additional home energy costs.** Your home energy costs are included in your insurance and operating expenses on line 8. If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs. You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.

\$

29. **Education expenses for dependent children who are younger than 18.** The monthly expenses (not more than \$189.58* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.

\$ 0.00

* Subject to adjustment on 4/01/25, and every 3 years after that for cases begun on or after the date of adjustment.

30. **Additional food and clothing expense.** The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. You must show that the additional amount claimed is reasonable and necessary.

\$ 0.00

31. **Continuing charitable contributions.** The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2).

+ \$

32. **Add all of the additional expense deductions.**

Add lines 25 through 31.

\$ 429.83

Debtor 1

GLADYS GRACE LIAD VILLACORTA
First Name Middle Name Last Name

Case number (if known) 732-24-13211

Deductions for Debt Payment**33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.**

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Mortgages on your home:**Average monthly payment**

33a. Copy line 9b here ➔ \$ 0.00

Loans on your first two vehicles:

33b. Copy line 13b here. ➔ \$ 0.00

33c. Copy line 13e here. ➔ \$ 0.00

33d. List other secured debts:

Name of each creditor for other secured debt**Identify property that secures the debt****Does payment include taxes or insurance?**

No

\$



Yes



No

\$



Yes



No

+ \$



Yes

33e. Total average monthly payment. Add lines 33a through 33d. \$ 0.00

Copy total here ➔

\$ 0.00

34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?

No. Go to line 35.



Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor**Identify property that secures the debt****Total cure amount****Monthly cure amount**

\$ ÷ 60 = \$

\$ ÷ 60 = \$

\$ ÷ 60 = + \$

Total

\$ 0.00

Copy total here ➔

\$ 0.00

35. Do you owe any priority claims such as a priority tax, child support, or alimony — that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.

No. Go to line 36.



Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims \$ ÷ 60 = \$

Debtor 1

GLADYS GRACE LIAD VILLACORTA

First Name

Middle Name

Last Name

Case number (if known) 732-24-13211

36. Are you eligible to file a case under Chapter 13? 11 U.S.C. § 109(e).

For more information, go online using the link for *Bankruptcy Basics* specified in the separate instructions for this form. *Bankruptcy Basics* may also be available at the bankruptcy clerk's office.

☐ No. Go to line 37.

☒ Yes. Fill in the following information.

Projected monthly plan payment if you were filing under Chapter 13 \$ 4,172

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).

x 0.10

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

Average monthly administrative expense if you were filing under Chapter 13

\$ 417.20

Copy total
here →

\$ 417.20

37. Add all of the deductions for debt payment.

Add lines 33e through 36.

\$ 417.20

Total Deductions from Income**38. Add all of the allowed deductions.**

Copy line 24, *All of the expenses allowed under IRS expense allowances*..... \$ 7,994.82

Copy line 32, *All of the additional expense deductions*..... \$ 429.83

Copy line 37, *All of the deductions for debt payment*..... + \$ 417.20

Total deductions \$ 8,841.85

Copy total here →

\$ 8,841.85

Part 3: Determine Whether There Is a Presumption of Abuse**39. Calculate monthly disposable income for 60 months**

39a. Copy line 4, *adjusted current monthly income* \$ 12,596.60

39b. Copy line 38, *Total deductions*..... - \$ 8,841.85

39c. Monthly disposable income. 11 U.S.C. § 707(b)(2).
Subtract line 39b from line 39a. \$ 3,754.75

Copy
here →

\$ 3,754.75

For the next 60 months (5 years)..... x 60

39d. **Total.** Multiply line 39c by 60.

\$ 225,285.00

Copy
here →

\$ 225,285.00

40. Find out whether there is a presumption of abuse. Check the box that applies:

☐ **The line 39d is less than \$9,075*.** On the top of page 1 of this form, check box 1, *There is no presumption of abuse*. Go to Part 5.

☒ **The line 39d is more than \$15,150*.** On the top of page 1 of this form, check box 2, *There is a presumption of abuse*. You may fill out Part 4 if you claim special circumstances. Then go to Part 5.

☐ **The line 39d is at least \$9,075*, but not more than \$15,150*.** Go to line 41.

* Subject to adjustment on 4/01/25, and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1

GLADYS GRACE LIAD VILLACORTA
First Name Middle Name Last Name

Case number (if known) 732-24-13211

41. 41a. **Fill in the amount of your total nonpriority unsecured debt.** If you filled out A *Summary of Your Assets and Liabilities and Certain Statistical Information Schedules* (Official Form 106Sum), you may refer to line 3b on that form.....

\$ 43,168.00

x .25

- 41b. **25% of your total nonpriority unsecured debt.** 11 U.S.C. § 707(b)(2)(A)(i)(I).

Multiply line 41a by 0.25.

\$ 10,792.00

Copy
here →

\$ 10,792.00

42. **Determine whether the income you have left over after subtracting all allowed deductions is enough to pay 25% of your unsecured, nonpriority debt.**

Check the box that applies:

- ☐ **Line 39d is less than line 41b.** On the top of page 1 of this form, check box 1, *There is no presumption of abuse.* Go to Part 5.
- ☒ **Line 39d is equal to or more than line 41b.** On the top of page 1 of this form, check box 2, *There is a presumption of abuse.* You may fill out Part 4 if you claim special circumstances. Then go to Part 5.

Part 4: Give Details About Special Circumstances

43. **Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for which there is no reasonable alternative?** 11 U.S.C. § 707(b)(2)(B).

- ☐ No. Go to Part 5.
- ☐ Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25.

You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments.

Give a detailed explanation of the special circumstances	Average monthly expense or income adjustment
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Part 5: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X

Signature of Debtor 1

X

Signature of Debtor 2

Date _____
MM / DD / YYYYDate _____
MM / DD / YYYY

EXHIBIT 13

From: [Ben Heston](#)
To: [Madoyan, Noreen \(USTP\)](#)
Cc: [Fouche, Marlene \(USTP\)](#)
Subject: Re: [EXTERNAL] Re: VILLACORTA, GLADYS GRACE LIAD 24-13211-DS Response due 06/04
Date: Monday, June 24, 2024 3:12:50 PM
Attachments: [image001.png](#)
[Screenshot 2024-06-20 095242.png](#)
[2nd Car Estimate.PNG](#)
[Motor Vehicle Order Agreement.pdf](#)
[Auto Insurance Statement.pdf](#)

See attached.

I will follow up in a little bit with more details since I am on my way out the door right now.

On Thu, Jun 20, 2024 at 10:01 AM Ben Heston <ben@nexusbk.com> wrote:

See attached.

There are only two differences from what I sent you previously: 1) there was a placeholder auto loan listed in what I sent you in the amount of \$30,000 which I removed, 2) the debtor and her husband got a quote for a second replacement vehicle which was around \$500, not \$400.

Also, ECF does not allow you to choose "yes" there is a presumption of abuse, however, we concede this point.



Let me know if there's anything else we can provide. Thanks!

On Tue, Jun 18, 2024 at 11:36 PM Ben Heston <ben@nexusbk.com> wrote:

I didn't see your email until well after close of business. *However*, my client and I were able to complete the necessary amendments along with the declaration regarding the presumption of abuse. See attached. I will have these filed as soon as I can get them signed. Please let me know if there's anything else I can provide.

On Tue, Jun 18, 2024 at 12:14 PM Madoyan, Noreen (USTP) <Noreen.Madoyan@usdoj.gov> wrote:

Mr. Heston,

There has been significant delay in this case, given that you have not yet filed the promised declaration. Please do so by close of business today so that the UST can evaluate the merits of the declaration. Otherwise, the UST may move to dismiss this case. In the alternative, if your client chooses to convert the case, as proposed below on May 29, please let me know immediately.

Best,
Noreen

From: Ben Heston <ben@nexusbk.com>
Sent: Monday, June 17, 2024 10:04 AM
To: Madoyan, Noreen (USTP) <Noreen.Madoyan@usdoj.gov>
Cc: Fouche, Marlene (USTP) <Marlene.Fouche@usdoj.gov>
Subject: Re: [EXTERNAL] Re: VILLACORTA, GLADYS GRACE LIAD 24-13211-DS Response due 06/04

Good morning,

Yes, I've been trying to get this completed while on a trip with my kids. As a newly single parent, I might have overestimated my "work hours" for the trip.

My client has provided me with all of the information necessary for us to submit a declaration in support of our rebuttal to the presumption of abuse. I am hoping to get this done ASAP, and I'm planning to make time for it by this evening at the latest .

On Mon, Jun 17, 2024 at 10:01 AM Madoyan, Noreen (USTP) <Noreen.Madoyan@usdoj.gov> wrote:

Mr. Heston,

We have not heard back from you. Do you have an update for us.

-N

From: Ben Heston <ben@nexusbk.com>
Sent: Tuesday, June 11, 2024 3:03 PM
To: Madoyan, Noreen (USTP) <Noreen.Madoyan@usdoj.gov>
Cc: Fouche, Marlene (USTP) <Marlene.Fouche@usdoj.gov>
Subject: Re: [EXTERNAL] Re: VILLACORTA, GLADYS GRACE LIAD 24-13211-DS Response due 06/04

Would it be possible to get a short extension on this? I have until tomorrow to get a 523/727 complaint filed along with a 707(b) motion, and somehow I'm supposed to drive my kids out to Las Vegas prior to that same deadline. If I could get until Friday, that would be sufficient.

On Thu, Jun 6, 2024 at 10:18 AM Madoyan, Noreen (USTP) <Noreen.Madoyan@usdoj.gov> wrote:

Mr. Heston,

Thank you for the explanation. Please proceed with filing the amended means test and provide the Debtor's declaration in support of rebutting the presumption by Tuesday, June 11, 2024.

Best,
Noreen

From: Ben Heston <ben@nexusbk.com>
Sent: Wednesday, June 5, 2024 7:39 AM
To: Fouche, Marlene (USTP) <Marlene.Fouche@usdoj.gov>
Cc: Madoyan, Noreen (USTP) <Noreen.Madoyan@usdoj.gov>
Subject: Re: [EXTERNAL] Re: VILLACORTA, GLADYS GRACE LIAD 24-13211-DS Response due 06/04

Good morning,

Yes, and sorry I didn't get back to you yesterday. I got a migraine that just completely wiped me out for the day. In the next day or two I will be filing an amended Means Test which will show that there is a presumption of abuse. I will be also filing a declaration to try and rebut the presumption. After speaking with my client and her husband, it seems that their expenses are already cut back as much as reasonably possible and they do not have any disposable income with which they could make a Chapter 13 payment. Additionally, they will need to be purchasing new vehicles within the coming months and are estimating that these payments will be approximately \$400 and \$500 dollars per month. My kids are getting out of school early today, so I will not be able to get that filed until tomorrow at the earliest.

On Wed, Jun 5, 2024 at 7:31 AM Fouche, Marlene (USTP) <Marlene.Fouche@usdoj.gov> wrote:

Dear Counsel,

Do you have an update on the response to the UST inquiry?

Regards,
Marlene

From: Ben Heston <ben@nexusbk.com>
Sent: Wednesday, May 29, 2024 9:49 AM
To: Fouche, Marlene (USTP) <Marlene.Fouche@usdoj.gov>
Cc: Madoyan, Noreen (USTP) <Noreen.Madoyan@usdoj.gov>
Subject: Re: [EXTERNAL] Re: VILLACORTA, GLADYS GRACE LIAD 24-13211-DS Response due 06/04

Got it. I will review this with my client and get back to you ASAP. Are appearances required for the hearing tomorrow?

On Wed, May 29, 2024 at 8:31 AM Fouche, Marlene (USTP) <Marlene.Fouche@usdoj.gov> wrote:

My apologies, yes, I used a household size of 3.

From: Ben Heston <ben@nexusbk.com>
Sent: Wednesday, May 29, 2024 8:28 AM
To: Fouche, Marlene (USTP) <Marlene.Fouche@usdoj.gov>
Cc: Madoyan, Noreen (USTP) <Noreen.Madoyan@usdoj.gov>
Subject: [EXTERNAL] Re: VILLACORTA, GLADYS GRACE LIAD 24-13211-DS Response due 06/04

Good morning,

Just to clarify, you used a household size of three, right? Your email says 2, but I think we're in agreement on the standardized expenses.

On Wed, May 29, 2024 at 8:03 AM Fouche, Marlene (USTP) <Marlene.Fouche@usdoj.gov> wrote:

Dear Counsel,

After careful review of the petition, schedules, and pay advices, the U.S. Trustee has determined that the presumption of abuse arises under § 707(b)(2) in this case. The U.S. Trustee's calculations were derived from the information provided in the debtor's schedules as well as the documents provided in response to the U.S. Trustee's inquiry. The U.S. Trustee's calculations use the household size of two.

Below is a side-by-side analysis of the debtor's means test compared to the U.S. Trustee's means test:

INCOME	Debtor	UST	
FORM 122A-1 LINE 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). DEBTOR#1	\$3,798.08	\$4,230.78	
FORM 122A-1 LINE 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). DEBTOR#2/NFS	\$5,455.87	\$5,911.64	
FORM 122A-1 LINE 11. Total Current Monthly Income	\$9,253.95	\$10,142.41	
FORM 122A-1 LINE 12b. Total Current ANNUAL Income	\$111,047.40	\$121,708.96	
ADJUSTMENTS TO INCOME	ABOVE	ABOVE	
EXPENSES			
FORM 122A-2 LINE 6 Food, Clothing and Other Items	\$1,700.00	\$1,700.00	
FORM 122A-2 LINE 7c Out of Pocket Health Care Allowance	\$237.00	\$237.00	
FORM 122A-2 LINE 8 Housing and Utilities - Insurance & Operating Expenses	\$799.00	\$799.00	
FORM 122A-2 LINE 9 Housing and Utilities - Mortgage or Rent Expenses	\$2,687.00	\$2,687.00	
FORM 122A-2 LINE 12 Vehicle operation expense	\$678.00	\$678.00	
FORM 122A-2 LINE 13a. Ownership or leasing costs using IRS Local Standard	\$0.00	\$0.00	
FORM 122A-2 LINE 16 Taxes	\$1,778.56	\$1,865.60	
FORM 122A-2 LINE 18 Life Insurance	\$33.17	\$28.22	
FORM 122A-2 LINE 21 Childcare	\$350.00	\$350.00	
FORM 122A-2 LINE 22 Additional Healthcare	\$400.00	\$163.00	
FORM 122A-2 LINE 23 Optional Phone Services	\$200.00		No justification - Monthly phone bill \$222.52
FORM 122A-2 LINE 25			
Health Insurance	\$321.38	\$334.96	
Disability Insurance	\$91.20	\$7.68	
Health Savings Account	\$80.78	\$87.19	
FORM 122A-2 LINE 30 Additional Food & Clothing	\$57.00		No justification
FORM 122A-2 LINE 36 Chapter 13 Admin expenses		\$120.48	Per Means Test calculations based on the aggregate of adjustments above
FORM 122A-2 LINE 39b Total deductions	\$9,413.09	\$9,058.12	
FORM 122A-2 LINE 39c Monthly Disposable Income per 707(b)(2)	(\$159.14)	\$1,084.30	
FORM 122A-2 LINE 39d TOTAL (multiply line 39c by 60)	(\$9,548.40)	\$65,057.85	
FORM 122A-2 LINE 41a TOTAL NONPRIORITY UNSECURED DEBT		\$ 43,168.00	
% REPAYMENT OVER 60 MONTHS		151%	

The net result is that the debtor has **an excess monthly income of \$1,084.30**. This will allow for the **repayment of 100% of the Schedule E/F debt** (\$43,168) over a 60-month period. Therefore, dismissal is warranted under both §§ 707(b)(2) and (b)(3).

Please let me know if you would like to stipulate to dismiss this case or convert to a Chapter 13 in lieu of our office taking formal action. **A response by 06/04/2024 is requested.**

Kindly,

Marlene Fouche
Bankruptcy Auditor

--

Benjamin Heston, Esq.
NEXUS BANKRUPTCY

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Benjamin Heston, Esq.
NEXUS BANKRUPTCY

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Benjamin Heston, Esq.
NEXUS BANKRUPTCY

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NEXUS BANKRUPTCY

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Benjamin Heston, Esq.
NEXUS BANKRUPTCY



2019 Lexus RX Hybrid

Mileage: 83,077 · Inglewood, CA (2 mi away)

\$30,197

GREAT DEAL

\$2,813 Below market

Pricing

\$30,197

GREAT DEAL

\$33,010

Avg. market price (IMV)

This car is \$2,813 below market price. We compared this car with similar 2019 Lexus RX Hybrid based on price, mileage, features, condition, dealer reputation, and other factors.



Price decreased

Price went down by \$1,801



18 days at this dealership

18 days on CarGurus · 0 saves

[Show price history](#)

Finance in advance

- ✓ Estimate your payment
- ✓ Get pre-qualified
- ✓ Shop with real, personalized rates

Your estimated payment* is

\$579 /mo est ⓘ

APR of 9.29%

Down payment (3%)

\$1,000

Credit score

Rebuilding <640	Fair 641-699	Good 700-749	Excellent 750-850
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Loan term

36 mo	48 mo	60 mo	72 mo
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CALVIN A GARCIA
5421 THORNBURN ST
LOS ANGELES

CA 90045-2224

20241651543160

Dear Member:

Congratulations! Your **NEW VEHICLE** loan has been preapproved for an amount financed not to exceed \$ **37,000.00** (subject to the terms and conditions below). Preapproved loan item No. **0219921361** is attached.

When the preapproved loan item is properly made out and endorsed by you (and your co-borrower/guarantor, if any) and the payee (authorized vehicle dealer) from whom you buy your vehicle, Navy Federal Credit Union ("Navy Federal") will honor the item for any amount up to that shown above if negotiated by **09/11/24**, so long as Navy Federal has not revoked this preapproval. (To maximize your negotiating leverage, do not divulge the upper limit of your preapproved credit to the authorized vehicle dealer). Navy Federal may revoke this approval and choose not to honor the attached item at any time in Navy Federal's sole discretion without notice to you prior to dishonoring the attached item.

You can use your preapproved loan item like a check when you have decided on the vehicle you wish to buy and have negotiated the best price with the dealer. **The item may only be payable to a dealership, and the item will NOT be paid unless ALL the necessary information and endorsements on the front AND reverse of the item have been completed and Navy Federal has not revoked this preapproval.** This includes the "Promissory Note Instrument" on the reverse of the item. It will be replaced by the Promissory Note, Security Agreement, and Disclosure (Promissory Note) that will be provided to you for completion as soon as we receive the negotiated item through the banking system. Signing the Promissory Note consummates the credit agreement and replaces the Promissory Note Instrument.

The loan has been preapproved based on the following estimates in **72** monthly installments at **5.290%** Annual Percentage Rate (APR), the rate currently in effect for the loan terms you have requested, with payments to be made by **DIRECT REMITTANCE**, starting approximately 30 days after the preapproved loan item is paid by Navy Federal. These estimates, including the APR, are based on the terms you requested, and could change if your loan terms change or if you choose a vehicle in a class (new/used/late model used) that differs from your application (see page 3 for additional information).

Interest begins to accrue on your permanent loan as of the date the item is paid by Navy Federal. If the interest rate remains the same as shown above, and if payments are made at exactly 30-day intervals, your **estimated** monthly payment will be at the rate of \$ **1,626.35** per \$100 borrowed. If you selected Guaranteed Asset Protection at the time of application, the flat enrollment fee of \$399 for a new or used car will be added to the item when received by Navy Federal, thereby increasing your loan amount by the enrollment fee and impacting the corresponding monthly payment.

☐ The preapproved credit amount stated above is in addition to the outstanding balance on your existing loan(s), which currently is \$ _____. The balance of that loan as of the date the preapproved item is paid by Navy Federal will be combined with your new loan(s) at the appropriate APR when conversion to permanent financing is accomplished.

☐ You have designated he/she has read the **Notice to Co-Signer (Guarantor) (NFCU 768)** before signing the "Promissory Note Instrument" on the back of the item. _____ as your co-borrower/guarantor. Be sure

If you have elected Guaranteed Asset Protection (GAP), please refer to the enclosed **Guaranteed Asset Protection Agreement and Disclosure** for details. GAP is voluntary and not required in order to obtain credit. We will not consider whether or not you elect the program in making our credit decision. If you elected GAP during your application, it will be reflected on your Promissory Note. You may cancel by contacting Navy Federal Credit Union toll-free in the U.S. at 1-888-842-6328. For toll-free numbers when overseas, visit **navyfederal.org**. Use 1-703-255-8837 for collect international calls. If you cancel within 60 days of enrolling in the program, we will credit the outstanding balance for any fees charged for the program. You should carefully read the **Guaranteed Asset Protection Agreement and Disclosure** for a full explanation of terms and conditions of the program; there are eligibility requirements, conditions, and exclusions that could prevent you from receiving benefits.

Also enclosed is a **Preapproved Vehicle Loan Instructions** form (NFCU 478) that you and the dealer must follow to cash your preapproved loan item. **Be sure to follow these instructions carefully and completely to ensure payment of the item.** (See enclosed "Additional Instructions for Vehicle Loans" for additional information.)

Again, congratulations on your forthcoming purchase of a vehicle. Should you have any questions about your preapproved loan, please call us by contacting Navy Federal Credit Union toll-free in the U.S. at 1-888-842-6328. For toll-free numbers when overseas, visit **navyfederal.org**. Use 1-703-255-8837 for collect international calls.

Sincerely,

Navy Federal Credit Union

Enclosures:



Motor Vehicle Order Agreement

Vehicle Configuration

Customer Information		Description	Total in USD
Calvin Garzia 90045 (213) 435-2747 fromthecalvin@gmail.com		Model 3 Rear-Wheel Drive	\$38,990
		Solid Black Paint	\$1,500
		18" Photon Wheels	Included
		Black Premium Interior	Included
		Autopilot	Included
		Cold Weather Feature	Included
		Subtotal	\$40,490
Order Number	RN122004916	Destination Fee	\$1,390
		Order Fee	\$250
Order Fee	\$250	Total	\$42,130
Order placed with electronically accepted terms	06/15/2024		

Price indicated does not include taxes and governmental fees, which will be calculated as your delivery date nears. You will be responsible for these additional taxes and fees.



Motor Vehicle Order Agreement Terms & Conditions

Documentation. Your Motor Vehicle Order Agreement (the "Agreement") is made up of the following documents:

1. **Vehicle Configuration:** The Vehicle Configuration describes the vehicle that you configured and ordered, including pricing (excluding taxes and official or government fees).
2. **Final Price Sheet:** The Final Price Sheet will be provided to you as your delivery date nears. It will include final pricing based on your final Vehicle Configuration and will include taxes and official or governmental fees.
3. **Terms & Conditions:** These Terms & Conditions are effective as of the date you place your order and make your Order Fee (the "Order Date").

Agreement to Purchase. You agree to purchase the vehicle (the "Vehicle") described in your Vehicle Configuration from Tesla, Inc. or its affiliate ("we," "us" or "our"), pursuant to the terms and conditions of this Agreement. Your Vehicle is priced and configured based on features and options available at the time of order and you can confirm availability with a Tesla representative. Options, features or hardware released or changed after you place your order may not be included in or available for your Vehicle. If you are purchasing a used Vehicle, it may exhibit signs of normal wear and tear in line with its respective age and mileage.

Purchase Price, Taxes and Official Fees. The purchase price of the Vehicle is indicated in your Vehicle Configuration. This purchase price does not include taxes and official or government fees, which could amount to up to 10% or more of the Vehicle purchase price. Because these taxes and fees are constantly changing and will depend on many factors, such as where you register the Vehicle, they will be calculated closer to the time of delivery and indicated on your Final Price Sheet. You are responsible for paying these additional taxes and fees. If Tesla is registering your Vehicle, this will be due when you pay the purchase price. If you are registering your Vehicle in a self-registration state, the sales tax and state-applicable registration fees may be due at time of registration. If you present a check for any payment, we may process the payment as a normal check transaction, or we may use information from your check to make a one-time electronic fund transfer from your account, in which case your bank account will reflect this transaction as an Electronic Fund Transfer. If you are purchasing a used Vehicle, your Order Deposit will be applied to your Purchase Price.

Order Process; Cancellation; Changes. After you submit your completed order, we will begin the process of preparing and coordinating your Vehicle delivery. At this point, you agree that any paid Order Fee, Order Deposit and Transportation fee have been earned. If you cancel your order or breach this Agreement and we cancel your order, you agree that we may retain as liquidated damages the Order Fee, Order Deposit and Transportation Fee, to the extent not otherwise prohibited by law. You acknowledge that the Order Fee, Order Deposit and Transportation Fee are a fair and reasonable estimate of the actual damages we have incurred or may incur in transporting, remarketing, and reselling the Vehicle, costs which are otherwise impracticable or extremely difficult to determine. If you make changes to your order, you may be subject to potential price increases for any pricing adjustments made since your original Order Date. Any changes made by you to your Vehicle Configuration, including changes to the delivery location or estimated delivery date, will be reflected in a subsequent Vehicle Configuration that will form part of this Agreement. The Order Fee, Order Deposit, Transportation Fee and this Agreement are not made or entered into in anticipation of or pending any conditional sale contract.

Delivery; Transfer of Title. If you are picking up your Vehicle in a state where we are licensed to sell the Vehicle, we will notify you of when we expect your Vehicle to be ready for delivery at your local Tesla Delivery Center, or other location as we may agree to. You agree to schedule and take delivery of your Vehicle within three (3) days of this date. If you do not respond to our notification or are unable to take delivery within the specified period, your Vehicle may be made available for sale to other customers. For new vehicles, if you do not take delivery within fourteen (14) days of our first attempt to notify you, Tesla may cancel your order and keep your Order Fee.

If you wish to pick up your Vehicle in a state where we are not licensed to sell the Vehicle, you agree that the sale is transacted in the state listed in the Seller's address above (the "Contracting State"). In such a case, the risk of loss of the Vehicle transfers to you in the Contracting State, and legal title to the Vehicle transfers to you in the Contracting State, at the time that Tesla receives your final payment in its entirety. If available, Tesla may, on your behalf and at your cost, coordinate the shipment of your Vehicle to you, generally from our factory in California or another state where we are licensed to sell the Vehicle. In such a case, you agree that this is a shipment contract under which Tesla will coordinate the shipping of the Vehicle to you via a third-party common carrier or other mode of transport. Upon the transfer of title, your Vehicle will be insured at no cost to you, and you will be the beneficiary of any claims for damage to the Vehicle or losses occurring while the Vehicle is in transit. To secure your final payment and performance



under the terms of this Agreement, we will retain a security interest in the Vehicle and all proceeds therefrom until your obligations have been fulfilled.

The estimated delivery date of your Vehicle, if provided, is only an estimate as we do not guarantee when your Vehicle will actually be delivered. Your actual delivery date is dependent on many factors, including your Vehicle's configuration and manufacturing availability.

Incentives. Tesla makes no promises, warranties or guarantees regarding fund availability or your eligibility for any incentives, rebates and tax credits (the "Incentives") related to the Vehicle. If Tesla has credited your Purchase Price for the amount of an Incentive, but you do not qualify for the Incentive, you shall reimburse Tesla for the amount of the credit. Failure to reimburse Tesla will constitute a default under this Agreement at which time Tesla may exercise any remedies available to it, including repossession of the Vehicle.

Agreement to Arbitrate. Please carefully read this provision, which applies to any dispute between you and Tesla, Inc. and its affiliates, (together "Tesla").

If you have a concern or dispute, please send a written notice describing it and your desired resolution to resolutions@tesla.com.

If not resolved within 60 days, you agree that any dispute arising out of or relating to any aspect of the relationship between you and Tesla will not be decided by a judge or jury but instead by a single arbitrator in an arbitration administered by the American Arbitration Association (AAA) under its Consumer Arbitration Rules. This includes claims arising before this Agreement, such as claims related to statements about our products. You further agree that any disputes related to the arbitrability of your claims will be decided by the court rather than an arbitrator, notwithstanding AAA rules to the contrary.

To initiate the arbitration, you will pay the filing fee directly to AAA and we will pay all subsequent AAA fees for the arbitration, except you are responsible for your own attorney, expert, and other witness fees and costs unless otherwise provided by law. If you prevail on any claim, we will reimburse you your filing fee. The arbitration will be held in the city or county of your residence. To learn more about the Rules and how to begin an arbitration, you may call any AAA office or go to www.adr.org.

The arbitrator may only resolve disputes between you and Tesla, and may not consolidate claims without the consent of all parties. The arbitrator cannot hear class or representative claims or requests for relief on behalf of others purchasing or leasing Tesla vehicles. In other words, you and Tesla may bring claims against the other only in your or its individual capacity and not as a plaintiff or class member in any class or representative action. If a court or arbitrator decides that any part of this agreement to arbitrate cannot be enforced as to a particular claim for relief or remedy, then that claim or remedy (and only that claim or remedy) must be brought in court and any other claims must be arbitrated.

If you prefer, you may instead take an individual dispute to small claims court.

You may opt out of arbitration within 30 days after signing this Agreement by sending a letter to: Tesla, Inc.; P.O. Box 15430; Fremont, CA 94539-7970, stating your name, Order Number or Vehicle Identification Number, and intent to opt out of the arbitration provision. If you do not opt out, this agreement to arbitrate overrides any different arbitration agreement between us, including any arbitration agreement in a lease or finance contract.

Connectivity. Standard Connectivity is included in your Vehicle, at no additional cost, for eight (8) years beginning on the first day your Vehicle was delivered as new by Tesla, or the first day it is put into service (for example used as a demonstrator or company vehicle), whichever comes first. A trial of Premium Connectivity will be included following delivery of the Vehicle. Once this trial is over as detailed at www.tesla.com/support/connectivity, you may subscribe to Premium Connectivity or your Vehicle will return to Standard Connectivity. Features included in Premium Connectivity are subject to change and may be limited or unavailable due to Obsolete Hardware. You understand and agree that the cellular or other network needed for any Connectivity is provided by your local telecommunications company and other external providers, and that we are not liable for any parts, software, upgrades or any other costs (including labor) needed to use or maintain network connectivity or compatibility with any features or services externally supplied to the Vehicle. Any connectivity issues (including for quality, functionality or coverage) or gaps in service unrelated to a hardware fault or failure are not covered by Tesla warranties.

Obsolete Hardware and Future Firmware Updates. The Vehicle will regularly receive over-the-air software updates that add new features and enhance existing ones over Wi-Fi. Future software updates may not be provided for your Vehicle, or may not include all



existing or new features or functionality, due to your Vehicle's age, configuration, data storage capacity or parts, after the expiration of your Warranty. We are not liable for any parts or labor or any other cost needed to update or retrofit the Vehicle so that it may receive these updates, or any Vehicle issues occurring after the installation of any software updates due to obsolete, malfunctioning (except as covered by your Warranty) or damaged hardware.

Privacy Policy; Payment Terms for Services; Supercharger Fair Use Policy. Tesla's Customer Privacy Policy; Payment Terms for Services and Supercharger Fair Use Policy are incorporated into this Agreement and can be viewed at www.tesla.com/about/legal.

Warranty. You will receive access to the Tesla New Vehicle Limited Warranty or the Tesla Used Vehicle Limited Warranty, as applicable, at or prior to the time of Vehicle delivery or pickup. The warranty version applicable to your Vehicle is that which was in effect when the Vehicle was first delivered or picked up from Tesla directly, including by any previous owners. You may also obtain a written copy of your warranty from us upon request and view the current version at our [website](http://www.tesla.com).

Limitation of Liability. We are not liable for any incidental, special or consequential damages arising out of this Agreement. Your sole and exclusive remedy under this Agreement will be limited to reimbursement of your Order Fee, Order Deposit and Transportation Fee.

No Resellers; Discontinuation; Cancellation. Tesla and its affiliates sell cars directly to end-consumers, and we may unilaterally cancel any order that we believe has been made with a view toward resale of the Vehicle or that has otherwise been made in bad faith, and we'll keep your Order Fee, Order Deposit and Transportation Fee. This includes orders for which a third-party is facilitating or brokering the sale, or if the vehicles are to be exported to somewhere other than where you tell us you will be registering the Vehicle. We may also cancel your order and refund your Order Fee, Order Deposit and Transportation Fee if we discontinue a product, feature or option after the time you place your order. We work to fulfill your order as quickly as we can. If you become unresponsive to us or fail to complete a requested action to progress towards delivery of your Vehicle, we may cancel your order and keep your Order Fee, Order Deposit and Transportation Fee. Alternatively, Tesla may give you the option to reconfigure your Vehicle at the current pricing.

Default and Remedies. You will be in default and/or breach of this Agreement if any one of the following occurs (except as prohibited by law): you fail to perform an obligation that you have undertaken in the Agreement; or we, in good faith, believe that you cannot, or will not pay or perform the obligations you have agreed to in this Agreement. You will also be in default and/or breach of this Agreement if you provide false or misleading information in your order, or do anything else the law says is a default. If you are in default, we may, after any legally required notice or waiting period: (i) do anything to protect our interest in the Vehicle, including repossessing the Vehicle using legally permitted means, (ii) locate and disable the Vehicle electronically using our remote dynamic vehicle connection described in our Privacy Policy, (iii) sue you for damages or to get the Vehicle back, and/or (iv) charge you for amounts we spend taking these actions, including but not limited to attorney fees and costs.

Governing Law; Integration; Assignment. Except as provided below, the terms of this Agreement are governed by, and to be interpreted according to, the laws of the State in your address indicated on your Vehicle Configuration. Prior agreements, oral statements, negotiations, communications or representations about the Vehicle sold under this Agreement are superseded by this Agreement. Terms relating to the purchase not expressly contained herein are not binding. We may assign this Agreement at our discretion to one of our affiliated entities.

State-Specific Provisions. You acknowledge that you have read and understand the provisions applicable to you in the State-Specific Provisions attachment to this Agreement.

This Agreement is entered into and effective as of the date you accept this Agreement, by electronic means or otherwise. By confirming and accepting this Agreement, you agree to the terms and conditions of this Agreement.



State Specific Provisions

For **NEW YORK** residents: If the Vehicle is not delivered in accordance with the Agreement within 30 days following the estimated delivery date, you have the right to cancel the Agreement and receive a full refund, unless the delay in delivery is attributable to you.

If this motor vehicle is classified as a used motor vehicle, the dealer named above certifies that the entire vehicle is in condition and repair to render, under normal use, satisfactory and adequate service upon the public highway at the time of delivery.

The dealer named above further certifies that this vehicle complies with the inflatable restraint system requirements found in section 419-a of New York State Vehicle and Traffic Law.

The amount indicated on the sales contract or lease agreement for registration and title fees is an estimate. In some instances, it may exceed the actual fees due the Commissioner of Motor Vehicles. The dealer will automatically, and within 60 days of securing such registration and title, refund any amount overpaid for such fees.

For **MASSACHUSETTS** residents: ATTENTION PURCHASER: All vehicles are WARRANTED as a matter of state law. They must be fit to be driven safely on the roads and must remain in good running condition for a reasonable period of time. If you have significant problems with the Vehicle or if it will not pass a Massachusetts inspection, you should notify us immediately. We may be required to fix the car or refund your money. THIS WARRANTY IS IN ADDITION TO ANY OTHER WARRANTY GIVEN BY US.

For **MICHIGAN** residents and purchasers: The terms of this Agreement are governed by, and are to be interpreted according to, Michigan law. The sale of your vehicle will be transacted outside of Michigan, and in a state in which Tesla has a license to sell vehicles, as explained in the body of the Agreement.

For **WASHINGTON, D.C.** residents:

NOTICE TO PURCHASER

IF, AFTER A REASONABLE NUMBER OF ATTEMPTS, THE MANUFACTURER, ITS AGENT, OR AUTHORIZED DEALER IS UNABLE TO REPAIR OR CORRECT ANY NON-CONFORMITY, DEFECT, OR CONDITION WHICH RESULTS IN SIGNIFICANT IMPAIRMENT OF THE MOTOR VEHICLE, THE MANUFACTURER, AT THE OPTION OF THE CONSUMER, SHALL REPLACE THE MOTOR VEHICLE WITH A COMPARABLE MOTOR VEHICLE, OR ACCEPT RETURN OF THE MOTOR VEHICLE FROM THE CONSUMER AND REFUND TO THE CONSUMER THE FULL PURCHASE PRICE, INCLUDING ALL SALES TAX, LICENSE FEES, REGISTRATION FEES, AND ANY SIMILAR GOVERNMENT CHARGES. IF YOU HAVE ANY QUESTIONS CONCERNING YOUR RIGHTS, YOU MAY CONTACT THE DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS.

Seller certifies that the information contained in the itemization of the purchase price, including the Vehicle Configuration, and required by Chapter 3 (Buying, Selling and Financing Motor Vehicles) of Title 16 of the Code of D.C. Municipal Regulations, is true to the best of our knowledge.

For **RHODE ISLAND** residents: Rhode Island law requires that all motor vehicles sold at retail must be in such condition as to pass a State safety inspection at the time of sale so as to protect consumers.

For **VIRGINIA** residents: **IF YOU ARE FINANCING THIS VEHICLE, PLEASE READ THIS NOTICE: YOU ARE PROPOSING TO ENTER INTO A RETAIL INSTALLMENT SALES CONTRACT WITH THE DEALER. PART OF YOUR CONTRACT INVOLVES FINANCING THE PURCHASE OF YOUR VEHICLE. IF YOU ARE FINANCING THIS VEHICLE AND THE DEALER INTENDS TO TRANSFER YOUR FINANCING TO A FINANCE PROVIDER SUCH AS A BANK, CREDIT UNION OR OTHER LENDER, YOUR VEHICLE PURCHASE DEPENDS ON THE FINANCE PROVIDER'S APPROVAL OF YOUR PROPOSED RETAIL INSTALLMENT SALES CONTRACT. IF YOUR RETAIL INSTALLMENT SALES CONTRACT IS APPROVED WITHOUT A CHANGE THAT INCREASES THE COST OR RISK TO YOU OR THE DEALER, YOUR PURCHASE CANNOT BE CANCELLED. IF YOUR RETAIL INSTALLMENT SALES CONTRACT IS NOT APPROVED, THE DEALER WILL NOTIFY YOU VERBALLY OR IN WRITING. YOU CAN THEN DECIDE TO PAY FOR THE VEHICLE IN SOME OTHER WAY OR YOU OR THE DEALER CAN CANCEL YOUR**



PURCHASE. IF THE SALE IS CANCELLED, YOU NEED TO RETURN THE VEHICLE TO THE DEALER WITHIN 24 HOURS OF VERBAL OR WRITTEN NOTICE IN THE SAME CONDITION IT WAS GIVEN TO YOU, EXCEPT FOR NORMAL WEAR AND TEAR. ANY DOWN PAYMENT OR TRADE-IN YOU GAVE THE DEALER WILL BE RETURNED TO YOU. IF YOU DO NOT RETURN THE VEHICLE WITHIN 24 HOURS OF VERBAL OR WRITTEN NOTICE OF CANCELLATION, THE DEALER MAY LOCATE THE VEHICLE AND TAKE IT BACK WITHOUT FURTHER NOTICE TO YOU AS LONG AS THE DEALER FOLLOWS THE LAW AND DOES NOT CAUSE A BREACH OF THE PEACE WHEN TAKING THE VEHICLE BACK. IF THE DEALER DOES NOT RETURN YOUR DOWN PAYMENT AND ANY TRADE-IN WHEN THE DEALER GETS THE VEHICLE BACK IN THE SAME CONDITION IT WAS GIVEN TO YOU, EXCEPT FOR NORMAL WEAR AND TEAR, THE DEALER MAY BE LIABLE TO YOU UNDER THE VIRGINIA CONSUMER PROTECTION ACT.

June 20, 2024

AUTO INSURANCE POLICY CHANGE
Policy Number: CAA 156006235



GARCIA, CALVIN
1705 PETAL DR
SAN DIEGO CA 92114-6935

Thank you for your 6 years of membership with the Auto Club. A change was recently made to your auto policy. The enclosed declarations page reflects this change.

This policy change will increase your premium by \$390.00 for the remainder of this policy period.

Your account will be adjusted to reflect this premium change for future payments. Your scheduled payment will continue to be processed automatically through our AAA Auto Pay payment plan.

A new set of **Proof of Insurance cards** is included. Please destroy your previous set, which are no longer valid, and replace them with the new set.

We are pleased to have the opportunity to be of service to you. If you have any questions, please call one of our Policy Service Representatives at the number below, weekdays from 7 a.m. to 9 p.m. or Saturday from 8 a.m. to 5 p.m. or visit your local Auto Club branch.

Respectfully,

Interinsurance Exchange of the Automobile Club

Billing Status
(THIS IS NOT A BILL)

Prior Balance:*	\$236.02
Current Balance:*	\$626.02
Minimum Due:*	\$118.89
Current Due Date:*	06/23/2024

Your account will be adjusted to reflect this premium change for future payments. Your scheduled payment will continue to be processed automatically through our AAA Auto Pay payment plan.

*Billing information is subject to change if additional changes or transactions are applied to the policy.

POLICYHOLDER SAVINGS DIVIDEND

Get money back just for insuring your car with us. Qualifying auto policyholders have received a Policyholder Savings Dividend in each year since 1990.

Last year, you received a Policyholder Savings Dividend of:

\$75

As a convenience, your dividend was applied to reduce the premium balance at the beginning of your current policy period.

Click [AAA.com/myaccount](https://www.aaa.com/myaccount) to access your policy and **pay your bill online**

Visit or call your local Auto Club branch
[AAA.com/branches](https://www.aaa.com/branches)

Call (877) 422-2100

Interinsurance Exchange of the Automobile Club

Automobile Insurance Policy Coverages and Limits Policy Change Declarations

Insurance is in effect only for the vehicles, coverages, and limits of liability shown on this declarations page and as set forth in the insurance policy and endorsements. These declarations, together with the contract and the endorsements in effect, complete your policy.

NAMED INSURED (Item 1.)					AUTO POLICY NUMBER: CAA 156006235	
GARCIA, CALVIN 1705 PETAL DR SAN DIEGO CA 92114-6935					POLICY PERIOD (PACIFIC STANDARD TIME)	
					POLICY EFFECTIVE DATE:	08-23-23 12:01 A.M.
					POLICY EXPIRATION DATE:	08-23-24 12:01 A.M.
					POLICY CHANGE EFFECTIVE DATE:	06-20-24 12:01 A.M.

SUBJECT OF POLICY CHANGE	THIS IS NOT A BILL
ADD/CHANGE VEHICLE AUTO - CORRECTION ANNUAL MILEAGE CHG	This policy change will increase your premium by \$390.

VEHICLES									
VEH. NO.	YEAR	MAKE	MODEL	IDENTIFICATION NUMBER	VEHICLE USE	GARAGE ZIP CODE	ANNUAL MILES	VERIFIED MILEAGE	SALVAGE
1	2008	HOND	FIT SW SPORT	JHMGD38628S063290	PLEASURE	92114	1,501 - 2,500	VERIFIED	NO
2	2024	TESL	MODEL 3 EV 4D 2WD	5YJ3E1EA2RF762959	PLEASURE	92114	12,501 - 15,000	VERIFIED	NO

COVERAGES AND LIMITS					ANNUAL PREMIUMS				
Coverage is not in effect unless a premium or the word "included" is shown.									
COVERAGES		LIMITS OF LIABILITY			Vehicle 1	Vehicle 2	Vehicle	Vehicle	Vehicle
Liability									
Bodily Injury	\$25,000	each person/	\$50,000	each occurrence	\$ 131	\$ 270			
Property Damage	\$50,000	each occurrence			\$ 96	\$ 214			
Medical									
					No Coverage	No Coverage			
Physical Damage (Actual Cash Value unless otherwise stated, less deductible)									
	Vehicle 1	Vehicle 2	Vehicle	Vehicle	Vehicle				
Comprehensive	ACV	ACV				\$ 74	\$ 410		
(Less Deductible)	\$500	\$500							
Collision	ACV	ACV				\$ 206	\$ 1901		
(Less Deductible)	\$500	\$500							
Car Rental Expense									
(Per Day)	No Coverage	No Coverage			No Coverage	No Coverage			
Uninsured Motorist									
Bodily Injury -	\$25,000	each person/	\$50,000	each accident	\$ 84	\$ 165			
Uninsured & Underinsured Vehicles									
Uninsured Deductible Waiver					Included	Included			
Uninsured Collision					No Coverage	No Coverage			
Total Premium					\$ 591	\$ 2960			

PREMIUM DISCOUNTS

Please refer to the enclosed document entitled "Premium Discounts Applied to Your Automobile Policy."

*** If at any time you choose to pay less than the full balance outstanding, finance charges of up to 1.5% per month of the balance outstanding will apply as explained in your billing statements, which are part of these declarations.**

"No Coverage" indicates coverage not purchased.

Adjusted Total Annual Premium* (Includes all applicable discounts.)	\$ 3551
Less Policyholder Savings Dividend (Previously applied to your premium balance)	\$ 75
Adjusted Net Annual Premium* (Balance after previous dividend)	\$ 3476

Interinsurance Exchange of the Automobile Club**Automobile Insurance Policy Coverages and Limits****Policy Change Declarations (continued)**

Insurance is in effect only for the vehicles, coverages, and limits of liability shown on this declarations page and as set forth in the insurance policy and endorsements. These declarations, together with the contract and the endorsements in effect, complete your policy.

NAMED INSURED (Item 1.)					AUTO POLICY NUMBER: CAA 156006235	
GARCIA, CALVIN 1705 PETAL DR SAN DIEGO CA 92114-6935					POLICY PERIOD (PACIFIC STANDARD TIME)	
					POLICY EFFECTIVE DATE:	08-23-23 12:01 A.M.
					POLICY EXPIRATION DATE:	08-23-24 12:01 A.M.
					POLICY CHANGE EFFECTIVE DATE:	06-20-24 12:01 A.M.

SUBJECT OF POLICY CHANGE	THIS IS NOT A BILL
ADD/CHANGE VEHICLE	This policy change will increase your premium by \$390.
AUTO - CORRECTION	
ANNUAL MILEAGE CHG	

VEHICLES									
VEH. NO.	YEAR	MAKE	MODEL	IDENTIFICATION NUMBER	VEHICLE USE	GARAGE ZIP CODE	ANNUAL MILES	VERIFIED MILEAGE	SALVAGE

COVERAGES AND LIMITS					ANNUAL PREMIUMS				
Coverage is not in effect unless a premium or the word "included" is shown.									
COVERAGES		LIMITS OF LIABILITY			Vehicle	Vehicle	Vehicle	Vehicle	Vehicle
Liability									
Bodily Injury	\$25,000	each person/	\$50,000	each occurrence					
Property Damage	\$50,000	each occurrence							
Medical									
Physical Damage (Actual Cash Value unless otherwise stated, less deductible)									
	Vehicle	Vehicle	Vehicle	Vehicle	Vehicle				
Comprehensive (Less Deductible)									
Collision (Less Deductible)									
Car Rental Expense (Per Day)									
Uninsured Motorist									
Bodily Injury -	\$25,000	each person/	\$50,000	each accident					
Uninsured & Underinsured Vehicles									
Uninsured Deductible Waiver									
Uninsured Collision									
Total Premium									

PREMIUM DISCOUNTS

Please refer to the enclosed document entitled "Premium Discounts Applied to Your Automobile Policy."

*** If at any time you choose to pay less than the full balance outstanding, finance charges of up to 1.5% per month of the balance outstanding will apply as explained in your billing statements, which are part of these declarations.**

"No Coverage" indicates coverage not purchased.

Adjusted Total Annual Premium* (Includes all applicable discounts.)	\$ 3551
Less Policyholder Savings Dividend (Previously applied to your premium balance)	\$ 75
Adjusted Net Annual Premium* (Balance after previous dividend)	\$ 3476

Interinsurance Exchange of the Automobile Club

Premium Discounts Applied to Your Automobile Policy



Auto Policy Number: CAA 156006235

The following automobile premium discounts are available from the Interinsurance Exchange. If you meet the discount requirements, an "X" will appear in the box next to the discount name and you will receive a premium reduction on all coverages that qualify for the discount.

<input type="checkbox"/>	MULTI-POLICY		
<input checked="" type="checkbox"/>	MULTI-VEHICLE		
<input type="checkbox"/>	SELECT PROFESSIONALS & GROUPS		
<input checked="" type="checkbox"/>	LOYALTY		
<input type="checkbox"/>	DRIVING COURSE		
<input type="checkbox"/>	MATURE DRIVER		
<input type="checkbox"/>	STUDENT AWAY		
<input type="checkbox"/>	GOOD STUDENT		
<input checked="" type="checkbox"/>	GOOD DRIVER	GARCIA, CALVIN	VILLACORTA, GLADYSGRACE
<input checked="" type="checkbox"/>	VERIFIED MILEAGE	2008 HOND FIT SW SPORT	2024 TESL MODEL 3 EV 4D 2WD

If you need additional information about any of the above discounts, please refer to the **Available Automobile Premium Discounts** insert included with your renewal offer (or the insert provided with your application). If you have additional questions about premium discounts or your auto policy, please call us at 1-877-422-2100.



 <p>PROOF OF INSURANCE Interinsurance Exchange of the Automobile Club NAIC # 15598</p> <p>Named Insured Policy Number: CAA 156006235 GARCIA, CALVIN</p> <p>Effective Date: 08-23-23 Expiration Date: 08-23-24</p> <p>This policy provides at least the minimum amounts of liability insurance required by the CA VEH CODE SECTION 16056 for the specified vehicles and named insureds. Coverage subject to policy terms and limits.</p>	<p>VEHICLES ON POLICY</p> <table><tr><td>YEAR</td><td>MAKE</td><td>VEH I.D. #</td></tr><tr><td>2008</td><td>HOND</td><td>JHMGD38628S063290</td></tr><tr><td>2024</td><td>TESL</td><td>5YJ3E1EA2RF762959</td></tr></table> <p>DRIVERS ON POLICY GARCIA, CALVIN VILLACORTA, GLADYSGRACE GARCIA, ANITA GARCIA, CHERLLINE GARCIA, CHRISTOPHER GARCIA, CESAR</p>	YEAR	MAKE	VEH I.D. #	2008	HOND	JHMGD38628S063290	2024	TESL	5YJ3E1EA2RF762959
YEAR	MAKE	VEH I.D. #								
2008	HOND	JHMGD38628S063290								
2024	TESL	5YJ3E1EA2RF762959								
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YEAR	MAKE	VEH I.D. #								
2008	HOND	JHMGD38628S063290								
2024	TESL	5YJ3E1EA2RF762959								

FOLD HERE



FOLD HERE



Get your digital proof of insurance & membership card
»»Download the app. Click [AAA.com/app75](https://www.aaa.com/app75)

Electronic proof of insurance may not be valid as proof in all states. Please keep your hard copy version on hand. Must be a current AAA member and insured through AAA to use this feature. Available for iPhone® and smartphones for Android™. Message, data and roaming rates may apply.



 <p>PROOF OF INSURANCE Interinsurance Exchange of the Automobile Club NAIC # 15598</p> <p>Named Insured Policy Number: CAA 156006235 GARCIA, CALVIN</p> <p>Effective Date: 08-23-23 Expiration Date: 08-23-24</p> <p>This policy provides at least the minimum amounts of liability insurance required by the CA VEH CODE SECTION 16056 for the specified vehicles and named insureds. Coverage subject to policy terms and limits.</p>	<p>VEHICLES ON POLICY</p> <table><tr><td>YEAR</td><td>MAKE</td><td>VEH I.D. #</td></tr><tr><td>2008</td><td>HOND</td><td>JHMGD38628S063290</td></tr><tr><td>2024</td><td>TESL</td><td>5YJ3E1EA2RF762959</td></tr></table> <p>DRIVERS ON POLICY GARCIA, CALVIN VILLACORTA, GLADYSGRACE GARCIA, ANITA GARCIA, CHERLLINE GARCIA, CHRISTOPHER GARCIA, CESAR</p>	YEAR	MAKE	VEH I.D. #	2008	HOND	JHMGD38628S063290	2024	TESL	5YJ3E1EA2RF762959
YEAR	MAKE	VEH I.D. #								
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<p align="center">IF YOU HAVE AN ACCIDENT CALL OUR 24/7 AAA CLAIMS HOTLINE 1-800-672-5246</p>	
<p>After an accident, exchange information with the other party and follow these 5 easy steps:</p> <p>Step 1: Pull vehicle over to a safe place. Get the names, addresses, and phone numbers of all persons involved in the accident, e.g., pedestrians, witnesses, other passengers, etc.</p> <p>Step 2: Take photos of or write down the other person's driver's license information and other vehicle's license plate number, including states of registration.</p> <p>Step 3: Take photos of or write down the other person's insurance card information.</p>	<p>Step 4: Take photos of the vehicles involved, damages and surrounding area of the accident, if it is safe to do so.</p> <p>Step 5: Call our AAA Claims Hotline at 800-672-5246 to report the loss. If necessary, we will arrange to have your vehicle towed. Our provider's tow trucks always display the AAA emblem.</p> <p><i>Do not admit responsibility for or discuss the circumstances of the accident with anyone other than the police or an authorized Auto Club claims representative. Do not disclose your policy limits to anyone.</i></p>
<p>For questions or changes to your policy, call 1-877-422-2100, Monday through Friday from 7 a.m. to 9 p.m. or Saturday from 8 a.m. to 5 p.m.</p>	
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Place a Proof of Insurance card in each vehicle insured under your policy. In addition, we suggest that each listed driver carry a card. Under California law, drivers and owners of a motor vehicle must be able to show proof of financial responsibility at all times. These cards become invalid and should be destroyed on the expiration or termination date of the policy.

**Call our AAA Claims
Hotline at 1-800-672-5246**

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EXHIBIT 14



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2016 Toyota RAV4

Limited Hybrid • 58k miles



2016 Lexus NX

300h • 77k miles

\$23,990

Estimated \$494/mo
\$0 cash down ⓘ

● **Free Shipping** • Get it Thursday

\$23,990

Shipping: \$1,090 • Get it Friday



2017 Nissan Rogue

SV Hybrid (2017.5) • 72k miles

\$16,590

Shipping: \$1,290 • Get it Saturday



Price Drop

2019 Nissan Rogue

SV Hybrid • 69k miles

was ~~\$20,990~~

↘ **\$20,590**

Shipping: \$1,090 • Get it Friday



Finance with Carvana

Price Drop

2021 Ford Escape

SE Hybrid • 24k miles

was ~~\$22,990~~

↘ **\$22,590**

Shipping: \$1,090 • Get it Friday

Real, personalized financing terms in less than 2 minutes, with no impact to your credit.

[GET PRE-QUALIFIED NOW](#)



Price Drop

2021 Ford Escape

SE Hybrid • 69k miles

was ~~\$19,590~~

↘ **\$18,990**

Shipping: \$1,090 • Get it Friday



Price Drop

2020 Ford Escape

SE Sport • 85k miles

was ~~\$19,590~~

↘ **\$18,990**

Shipping: \$1,090 • Get it Friday





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Price Drop

2021 Ford Escape

SE Hybrid • 55k miles

was ~~\$21,990~~

 **\$21,590**

Shipping: \$1,290 • Get it Friday



Price Drop

2020 Ford Escape

SE Sport • 70k miles

was ~~\$21,590~~

 **\$20,990**

Shipping: \$1,090 • Get it Friday



2021 Ford Escape

SEL Hybrid • 72k miles

was ~~\$21,990~~

↘ **\$21,590**

Shipping: \$1,090 • Get it Friday



2021 Ford Escape

SE Hybrid • 87k miles

was ~~\$19,990~~

↘ **\$19,590**

Shipping: \$1,090 • Get it Friday



Price Drop

2020 Ford Escape

Titanium Hybrid • 70k miles

was ~~\$21,990~~

↘ **\$21,590**



2022 Ford Escape

SE Hybrid • 53k miles

\$20,990

Shipping: \$1,090 • Get it Friday

Shipping: \$1,590 • Get it Saturday



2020 Ford Escape

SE Sport • 39k miles

\$21,590

Shipping: \$1,290 • Get it Saturday



Price Drop

2021 Ford Escape

SE Hybrid • 81k miles

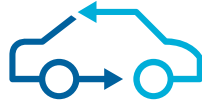
was ~~\$19,590~~

 **\$18,990**

Shipping: \$1,590 • Get it Saturday



2020 Ford Escape



TRADE IN YOUR CAR WITH CARVANA

GET YOUR OFFER

Titanium Hybrid • 31k miles

\$23,590

Shipping: \$1,290 • Get it Saturday



2020 Ford Escape

SE Sport • 48k miles

\$21,990

Shipping: \$1,290 • Get it Saturday



2021 Ford Escape

SE Hybrid • 43k miles

\$22,990

Shipping: \$1,590 • Get it Saturday



Save \$1,500+ with these
great deals



\$23,590

Shipping: \$1,590 • Get it Saturday

Browse cars that save you \$1,500 or more vs. Kelley Blue Book® Typical Listing Price.

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Logistics Hubs
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SUPPORT



Support & Contact

UNITED STATES BANKRUPTCY COURT
Central District of California Los Angeles

In re:
Gladys Grace Liad Villacorta,
Debtor(s).

Case No.: 24-13211
Chapter: 7

PROOF OF SERVICE

I, Tinamarie Feil, state as follows:

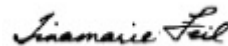
I am over the age of 18 and not a party to the above-captioned case. I am employed by BMC Group, Inc., an Approved Bankruptcy Notice Provider authorized by the United States Courts Administrative Office, pursuant to Rules 9001(9) and 2002(g)(4) of the Federal Rules of Bankruptcy Procedure.

I declare that on 07/02/2024, as directed by Office of the United States Trustee, true and correct copy(s) of the following document(s) were served on the party(s) listed on the attached exhibit(s) via the mode(s) of service thereon indicated. Such service was performed under my direct supervision, by employees of BMC Group, Inc.

Villacorta // Mtn to Dismiss 707b

I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct.

07/02/2024



Tinamarie Feil
BMC Group, Inc.
Approved Bankruptcy Notice Provider
info@bmccgroup.com;
888.909.0100

Exhibit A - Certificate of Service
Gladys Grace Liad Villacorta 24-13211

List ID	Name and Address of Served Party	Mode of Service
17151	Benjamin Heston, Nexus Bankruptcy, 3090 Bristol Street #400, Costa Mesa, CA, 92626, United States of America, bhestonecf@gmail.com	First Class
17151	Gladys Grace Liad Villacorta, 5421 Thornburn St, LOS ANGELES-CA, Los Angeles, CA, 90045-2224, United States of America	First Class
17151	U.S. Bankruptcy Court, Hon. Deborah J. Saltzman, 255 E. Temple Street, Suite 1634, Los Angeles, CA, 90012	First Class